

## Rice Street Old School Boxing Gym

**Assumption of Risk and Waiver of Liability.** Participation in boxing, boxing style training and physical conditioning involves inherent risks and I will stop any activity or training if I feel fatigue or discomfort of any kind. While I am in good physical condition and have no disabilities that prevent or limit my participation, there is inherent risk of injury, whether caused by me or someone else, in the use of or presence at the Rice Street Old School Boxing Gym (RSOSBG), the use of the RSOSBG's equipment and services, and participation in any training and activity at the RSOSBG. This risk includes, but is not limited to:

1. Injuries arising from the use of RSOSBG's equipment, including any accidental or "slip and fall" injuries;
2. Injuries arising from the participation in supervised or unsupervised activities and programs within RSOSBG's facility or outside RSOSBG's facility, to the extent sponsored or endorsed by RSOSBG;
3. Injuries or medical disorders arising from exercise at RSOSBG, including but not limited to heart attacks, strokes, heart stress, sprains or tears to muscles, ligaments, or tendons, broken bones, bruises and;
4. Injuries resulting from the actions taken or decisions made regarding medical or survival procedures.

I understand and voluntarily accept this risk and agree to specifically assume all risk of injury, whether physical or mental, while I am using or present at the RSOSBG, using any of RSOSBG's equipment or services. I waive any and all claims or actions that may arise against RSOSBG, its owners, directors, employees or volunteers as a result of any such injury to any such person, including and without limitation, personal, bodily, or mental injury, economic loss or any damages resulting from the negligence of RSOSBG or anyone else using RSOSBG. If there is a claim by anyone based on any injury, loss, or damage that involves me, I agree to defend RSOSBG against such claims and pay RSOSBG for all expenses relating to the claim and indemnify RSOSBG for all obligations resulting from such claims.

I have read this agreement thoroughly and understand the terms. My presence at and the use of the RSOSBG and my execution of this agreement are voluntary, and I elect to accept this agreement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Authorized RSOSBG Representative