



## Activity Participation Agreement

### Activity Information

Name of Sponsoring Organization: Utmost Athletics via The Columbia Future Forge

Address: 8715 St Helens Ave Vancouver, WA 98664 Phone: 360-694-7549

Name of sponsor's coordinator: Ty Singleton - Founder & Director Phone: 360-607-0057

Description of activity: Utmost Athletics strength & conditioning training

Dates of Activity: Sunday-Thursday, September 1, 2020 - September 1, 2021

### Participant Information (To be completed by participant or authorized parent/guardian)

Name of participant: \_\_\_\_\_ Participant phone: \_\_\_\_\_

Name of parents/guardians: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

School for 2020-21: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Allergies or medical conditions: \_\_\_\_\_

Is the sponsor authorized to approve medical treatment?  Yes  No

Is participant covered by personal/family medical insurance?  Yes  No

If yes, name of insurer: \_\_\_\_\_

Insurance company & policy or group number: \_\_\_\_\_

### Participation Agreement

I acknowledge that participation in the activity described above involves risk to the participant (and to the Participant's parent or guardians, if the Participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, property damage and financial damage. In consideration for the opportunity to participate in the activity described about (the Activity), the Participant (or parent/guardian if Participant is a minor) acknowledges and accepts the risks of injury associated with participation in and transportation to and from the Activity. The Participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during the Activity or during transportation to and from the Activity, as well as for any medical treatment rendered to the Participant that is authorized by the sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to hereinafter as the Activity Sponsor). Further, the Participant (or parent/guardian) releases and promises to indemnify, defend and hold harmless the Activity Sponsor for any injury arising directly or indirectly out of the described Activity or transportation to and from the Activity, whether such injury arises out of the negligence of the Activity Sponsor, the Participant, or otherwise. If a dispute over this agreement or any claim for damages arises, the Participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the participant (or parent/guardian) and the Activity Sponsor cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel for resolution pursuant to the rules of the American Arbitration Association.

Signature of Participant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian (if Participant is a minor) \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian (if Participant is a minor) \_\_\_\_\_ Date: \_\_\_\_\_