

Parent/Legal Guardian's Signature

## LONG ISLAND SPORTS CENTER

22 Lumber Road, Roslyn New York, 11576 Tel. 516-621-1402 Website: www.LongIslandSportsCenter.com Email: longislandsportscenter@gmail.com

## WAIVER AND RELEASE OF LIABILITY

Note: This form must be read and signed before the participant is permitted to take part in event sessions. By signing this agreement, the participant affirms having read it.

In consideration of my membership, walk-in status, or my involvement at this and any future Long Island Sports Center LLC Training Programs, Open Gyms, or any other Programs, Events, or Activities, however named, organized, and/or announced (collectively, the "Long Island Sports Center Programs") under the auspices of Long Island Sports Center, LLC. ("Long Island Sports Center"), I, on behalf of myself and as parent or guardian of the minor child (if any) listed below, and our heirs expressly and freely acknowledge and agree that:

- 1. I risk bodily injury from the various activities offered at Long Island Sports Center, including paralysis, dismemberment, disability, and death, and while particular rules of the sport, equipment, and discipline may reduce this risk, this risk of injury does exist, as well as the risk of damage to or loss of property.
- 2. I knowingly and freely assume all such risk; both known and unknown, even if arising from the negligence of the releases of others.
- 3. I willingly agree to comply with the stated and customary conditions for participation. If, however, I observe any unusual or unnecessary hazard during participation or if I observe any concern in my readiness in my participation, I will immediately bring such to the attention of the nearest official and refrain from participation.
- 4. I, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, hold harmless and promise forever not to sue Long Island Sports Center, their officers and staff, sponsors, volunteers, heirs, sponsors and/or agents ("releasees") with respect to any and all injury damage and loss arising from my participation in Long Island Sports Center activities, whether caused by the negligence of the releasees, the condition of the premises or otherwise, except that which is the result of gross negligence or wanton misconduct to the fullest extent permitted by law.
- 5. I agree to be bound by the rules and regulations of Long Island Sports Center and I hereby stipulate that I am eligible to participate in the various sporting activities for which I apply and participate in and that I understand that the above mentioned make no representation or warranty with respect to the condition of the premises or the operation of event.
- 6. I, hereby grant to Long Island Sports Center, its licensees, sponsors and contractors including photographers, television and motion picture companies, their affiliates and subsidiaries, full photography, television and motion picture rights including authority to film or videotape me during matches, narratives, personal interviews, or comment thereon for any and all commercial, news or other purposes together with the right to transfer or grant their rights to others, all without remuneration or compensation to me whatsoever.

I acknowledge that I have read this Release of Liability and Waiver Agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

Participant's Name (Printed)	Participant's Signature	Date
Email:	Phone:	
FOR PARTICIPANTS OF MINORITY AGE		
also for myself/ourselves, and my/ours heirs, as my/our child's involvement as stated above, EVE	(s) with legal responsibility for this member, do consent and agree r signs and next of kin to release and indemnify the Releasees from ar EN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the ful bility and Waiver Agreement, fully understand its terms, understand and voluntarily without any inducement.	ny and all liability incident to lest extent permitted by law.

Relationship to Participant

Date

Parent's/Guardian's Name (Printed)