**212° AAU GROUP WAIVER AND CONSENT FORM**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, understand that a minimal level of fitness is necessary to engage in this activity. I further recognize that participation in this activity can expose me and my group to risks and hazards that are directly or inherently involved and

Could result in injury or development of a physical condition that may be serious in nature, including the potential loss of limb or life. With full knowledge of the facts and circumstances surrounding this activity. I voluntarily undertake in this participation, including all risks of loss of limb or life, property damage, injury to others and hazards to me and my group.

I assure the Hempfield and Springdale School Districts, that there are no health-related reasons or problems that preclude or restrict my participation in this activity. I have adequate health insurance necessary to provide for and pay any medical costs that may directly or indirectly resulting from my participation in this activity and that I will indemnify and hold the Hempfield and Springdale school Districts or the 212° Wildcats organization harmless in this regard.

I execute this document on my behalf and my group (listed below) with full knowledge of the contents and the consequences stated in this release and waiver.

DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 PRINT NAME GRADE SIGNATURE

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