

## The Team Unbreakable Youth Running Therapy Program

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### Release and Indemnity - Participant:

This agreement is between

**Participant** Name & Address: \_\_\_\_\_

hereafter referred to as "participant"

And Operator Organization: **{insert legal name & address}**

hereafter referred to as "Organization"

I the "participant" know and understand that all fitness initiatives can have potentially hazardous activities associated with them. I should not participate prior to approval by my physician. I assume any and all other risks associated with my participation in this program including but not limited to falls, contact with other participants, the effects of the weather including high heat and/or humidity, the conditions of the roads, all such risks being known and appreciated by me. Knowing these facts, in consideration of the Team Unbreakable Youth Running Therapy Program operated by the "Organization" I hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages sustained by me as a result of my participation in this program, for any cause whatsoever, including negligence. It is expressly understood by the undersigned that this program is entered into at the sole risk of the undersigned and that the CameronHelps 2006 Inc, the "Organization", all employees, volunteers and board of directors of CameronHelps 2006 Inc and the "Organization" are exempt from liability for any and all damages sustained and any and all injury and loss, including personal and property loss arising from any cause whatsoever, including negligence. I hereby acknowledge having read this Release and Waiver and I understand and accept its terms.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Participant

Please print name here:

\_\_\_\_\_  
Acknowledgement of Parent/Guardian

Please print name here: