



# Australian Warrior Fitness

46 656 512 171

## LIABILITY WAIVER

PLEASE READ CAREFULLY

### A WAIVER IS A LEGAL DOCUMENT WHICH AFFECTS YOUR LEGAL RIGHTS

This waiver covers all athletes participating in all Australian Warrior Fitness (AWF) events, training, competitions and recreational activities including the use of the AWF Ninja Warrior style obstacle course and all related obstacles and equipment.

I, \_\_\_\_\_  
(participant over the age of 18 OR parent/guardian of participant under the age of 18)

Of (Address) \_\_\_\_\_

#### PLEASE TICK

I hereby authorize AWF of 17 Wollong Street, North Gosford, or anyone authorized by them, to use and reproduce all pictures, videos, voice dialogue or any other media of me. I authorize AWF to use all data including my name, home town, social media handles/names, or any other information disclosed by me to AWF and all other information regarding my participation in AWF events (materials) without any notice or compensation to me. The materials shall remain the property of AWF in perpetuity. Such materials will be used in connection with the business of AWF or its designees in a manner authorized by AWF. The rights set forth in the waiver include, but are not limited to, the right to use, copy and modify such materials in connections with websites, YouTube, Facebook and Instagram accounts owned or operated by AWF or its designees.

#### PLEASE TICK

As the legal guardian/parent or as representative of myself (If over 18), I acknowledge my participation in AWF events may be hazardous and I assume all responsibility and risk for any accidents, sickness or other mishaps including but not limited to death, serious bodily injury, permanent disability that may result to me while training or competing with the AWF. I hereby affirm that I/ or my child am in good physical condition and do not suffer from any known disability or condition which would prevent or limit my participation in any AWF events or programs that involve running, jumping, climbing, hanging or balancing for extended periods of time. I recognise my heart rate will be elevated at all times during training and events and I do not suffer from any condition that may endanger my safety or the safety of others participating in training.

#### PLEASE TICK

I acknowledge that my enrollment and subsequent participation in purely voluntary and on behalf of my executors, past, present and future heirs, assigns and legal representatives, do hereby waive, release and forever discharge AWF and all of its officers, directors, employees, subcontractors, agents and representatives from any and all claims, debts, demands, rights, liabilities, actions, losses, damages, costs or expenses including reasonable legal fees whatsoever, arising and resulting from or relating to, Ninja Warrior training or competition. I agree

and covenant not to sue, or bring any claims against AWF or any of its respective members with respect to any matters that result from or are related to Ninja Training or events associated with AWF. In the event that I or anyone else on my behalf, institutes any such action, that claim shall be dismissed upon presentation of this waiver and release and I will reimburse AWF or its officers for any and all legal fees or expenses relating to defending such a claim and obtaining its dismissal.

**PLEASE TICK**

→  I have read AWF's Code of Conduct and Conditions of Entry and agreed to its terms. In addition, I understand and agree that AWF reserves the right to temporarily remove or ban athletes from participating in AWF events or training for any reason.

**PLEASE TICK**

→  I have read this waiver and release and I fully understand that AWF training, programs and competitions may involve strenuous physical activity including, but not limited to, muscle strength and endurance training, cardiovascular conditioning and training, and other various fitness activities. I confirm that I understand all related terms and that I have given up substantial rights by signing this waiver and release and represent I am signing this waiver freely and voluntarily without any inducement. I also certify that I have appropriate insurance coverage for any and all possible injuries that may occur at or in connection with any AWF related events or training in which I am participating.

**I HEREBY AFFIRM THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.**

**Participant info (If over 18years old):**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Parent/ Guardian- (on behalf of participant under 18 years old)**

Participant name: \_\_\_\_\_  
Name of Parent/ Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Address: \_\_\_\_\_

**PLEASE TICK**

→  **By ticking this box, I agree by typing my full name constitutes as my E-Signature and agreement to full terms and conditions of this waiver.**

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