

WAIVER AND RELEASE OF LIABILITY

Every Participant (Participant's Guardian) Must Read and Understand this Waiver Prior to Participation in Flexy-T Online Classes.

This Agreement will affect your legal rights please read it fully and carefully.

I, the undersigned, recognize that risk of significant injury or potential health risks may be involved in my participation in **online** classes, workshops and other activities with **Flexy-T Entertainment** ("Activities"). I acknowledge and fully understand that myself and each participant in the Activities will be engaging in activities that involve health risks and the risk of serious personal injury including, but not limited to, permanent disability and death, and severe social and economic losses ("Risks") which may result not only from my own actions, inactions or negligence but the actions, inactions, or negligence of others, the condition of the premises used to conduct the Activities or the condition of any equipment used.

In consideration of being permitted to participate in the Activities I, for myself, my heirs, executors, administrators, successors, assigns, personal representatives and next of kin HEREBY RELEASE, WAIVE, AND FOREVER DISCHARGE **Flexy-T Entertainment**, and all its respective agents, employees, volunteers, officials, servants, contractors, representatives, coaches, sponsoring agencies, successors, heirs and assigns, and other participants in the Activities, and, if applicable, owners and lessors of premises used to conduct the Activities ("Releasees") OF AND FROM ALL liability, claims, demands, damages, costs and actions whatsoever and however caused arising or to arise in the future by reason of or in connection with my participation in the Activities or any of its associated activities, whether arising from the negligence of the Releasees or otherwise.

I freely accept and assume any and all responsibility for all Risks and property damage or loss resulting from my participation in the Activities. I accept these Risks and agree to the terms of this waiver even if any or all of the Releasees are found to be negligent or in breach of any duty of care or any obligation to me.

I confirm that I have reached the age of majority in the province or territory in which I am participating in the Activities.

I have read this document in its entirety and fully understand its terms. I understand that I have given up substantial rights by signing it and acknowledge that I sign it freely and voluntarily without any inducement.

PARTICIPANT NAME (Printed): _____
(Or PARTICIPANT'S GUARDIAN)

PARTICIPANT SIGNATURE: _____
(Or PARTICIPANT'S GUARDIAN)

Signed this _____ day of _____, 20__

WITNESS NAME (Printed): _____

WITNESS SIGNATURE: _____

Signed this _____ day of _____, 20__