WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

1. I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE, The International Yang Style Tai Chi Chuan Association, its affiliates, including the Yang Chengfu Tai Chi Chuan Center(s), its directors, officers, agents, servants, employees, instructors, members of the International Yang Style Tai Chi Chuan Association and/or Yang Chengfu Tai Chi Chuan Center(s), and/or fellow participants, (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or any of the property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise, while participating in, or while in, on or upon the premises where the any activity associated with the RELEASEES is being conducted.

2. I am fully aware that Tai Chi Chuan (Taijiquan) is a martial art and there are unusual risks involved and hazards connected with teaching, learning and practicing Tai Chi Chuan (Taijiquan). Examples of some of the risks might include: injury caused by oneself, other participants, or instructors because of a failure to exercise appropriate care in controlling weapons or in managing physical contact during practice, demonstration, or teaching of postures, martial applications, techniques, or exercises; the possibility of injuring oneself from engaging in potentially vigorous or demanding physical activity; the possibility of injury from known or unknown hazards present in the space or location where the activity takes place; and the possibility of injury from known or unknown hazards or defects in the equipment provided to oneself, other participants, or instructors in connection with the activity.

3. I hereby elect to voluntarily participate in said activity with full knowledge that said activity may be hazardous to me and my property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH, that my be sustained by me, or any loss or damage of property owned by me, as a result of being engaged in such activity, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERWISE.

4. I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage or costs, including court costs and attorney fees, that they may incur due to my participation in said activity, WHETHER CAUSED BY NEGLIGENCE OF RELEASEES or otherwise.

5. I understand that the RELEASEES, do not maintain any insurance policy, other than standard insurance coverage, covering any circumstance arising from my participation in this activity or event or any activity associated with or facilitating that participation. As such, I am aware that I should review my personal insurance portfolio.

6. It is my express intent that this Waiver of Liability and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO USE the above-named RELEASEES. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the State of Washington.

7. IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Release for full, adequate and complete consideration fully intending to be bound by same.

_____ _____

Printed Name Signature

_____

Date

If Participant is under the age of 18, Parent/Guardian consents to the minor's participation in the event or class to seek reasonable and necessary medical treatment for Participants during such event or associated activities, and agrees to be responsible for any cost of such treatment.

Parent/Guardian Signature Date