

ABSOLUTE

MIXED MARTIAL ARTS

ABSOLUTE MMA – AMATEUR AND NOVICE MMA EVENT SATURDAY, JUNE 5 2017

Declaration of Understanding & Waiver of Liability

I, (name of participant) _____ the undersigned, knowingly and without duress, do voluntarily participate in the AMATEUR AND NOVICE MMA Competition at Absolute MMA.

I understand and acknowledge that the training and the tournament event involves some degree of risk of personal injury. I warrant that I am medically sound and hereby assume all risk of physical and mental injuries, disabilities and losses which may result from or in connection with my participation in the AMATEUR AND NOVICE MMA Competition. Acting for myself, heirs, personal officers, agents, representatives and assignees, I do hereby release Absolute MMA, their officers, agents, representatives, volunteers, and other related members from all claims, actions, suits, and demands of every kind in of or resulting from any accident, injury or damage (including but not limited to the participant's person, whether fatal or otherwise, property and personal belongings) that I may sustain while participating in the AMATEUR AND NOVICE MMA Competition.

I fully understand that all medical attention or treatment afforded to me Absolute MMA contracted doctors, volunteers, and all other related members will be of the first aid only, and hereby release Absolute MMA and its officers, representatives, volunteers, and all other related members from any liability for administering such aid.

I agree to abide by and follow the rules and regulations established by the Absolute MMA.

I agree that my performance, attendance, and participation at the AMATEUR AND NOVICE MMA Competition may be photographed, filmed or otherwise recorded or released.

I consent to the use by Absolute MMA, of my name, address, voices, poses, pictures and biographical data in full or in part, in any form or language, with or without other material, throughout the world, without limitation, for, promotional material, internet, television, radio, video, theatrical medium picture, or any other medium by any devices now known or hereafter devised and I do hereby Waive any compensation in regard thereof as well as any future rights to the aforementioned.

I have read and fully understand the declaration listed above.

Participant Name: _____

Participant Signature: _____

Parent/Legal Guardian Signature: _____
(Parent/Legal Guardian to sign if under 18 yrs)

Dated this _____ day of _____ 20_____