



# Advantage Wrestling Camp

## WAIVER & RELEASE FROM LIABILITY

Camp Participant's Full Name: \_\_\_\_\_  
(PRINT PARTICIPANT'S NAME)

1. I, \_\_\_\_\_, the undersigned, as the parent or guardian of the above named participant, hereby  
(Parent or Legal Guardian's Name)

FOREVER RELEASE, DISCHARGE AND COVENANT NOT TO SUE PYA, ADVANTAGE WRESTLING LLC and THE UNITED STATES OF AMERICA WRESTLING ASSOCIATION, INC., its insurers, its affiliated clubs, administrators, agents, directors, officers, state organizations, members, committees, volunteers, all employees of PYA, Advantage Wrestling Camp, Advantage Wrestling LLC and USA Wrestling, and any and all participants, officials, referees, coaches, host clubs, sponsoring agencies, sponsors, advertisers, local organizing committees (and if applicable) owners, lessors and operators of premises used to conduct any PYA, Advantage Wrestling LLC and USA Wrestling sanctioned event, camp, meet, practice or activity (all hereinafter "Releasees") from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present or future, direct or consequential that I may hereafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of my son or daughters participation in, attendance at or traveling to and from Advantage Wrestling Camp, Advantage Wrestling LLC, and any USA Wrestling sanctioned event or activity including, but not limited to, LOSSES CAUSED BY THE PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used. 2. Releasor understands and acknowledges that PYA, Advantage Wrestling Camp, Advantage Wrestling LLC and USA Wrestling sanctioned events, camps, activities and the sport of wrestling in general have inherent dangers that no amount of care, caution, training, instruction, supervision or expertise can eliminate. RELEASOR EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, sustained while participating in, attending, preparing for or traveling to and from any PYA, Advantage Wrestling LLC and USA Wrestling sanctioned event, camp, meet, tournament, practice or activity, including the risk of PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used. 3. Releasor acknowledges and fully understands that each participant in any PYA, Advantage Wrestling LLC and USA Wrestling sanctioned event, camp, meet, practice or activity, including Releasor, will be engaging in activities that involve risk of serious injury, including permanent, temporary, total or partial disability, disfigurement, paralysis and any other losses to person or property, including death, and that severe social and economic losses may result not only from Releasor's own actions, in actions or negligence, but also from the actions, in actions or negligence of others notwithstanding the rules of play or the condition of the premises or of any equipment used. Further Releasor acknowledges and fully understands that there may be other associated risks with such activities which are not known or not reasonably foreseeable at this time. I consent to any emergency medical treatment of my son/daughter and hereby assume responsibility for payment for such treatment. Also as a condition of participation of the Advantage Wrestling Camp all participants must have had a physical checkup with a certified physician within the last calendar year.

MY SON/DAUGHTER HAS HAD A PHYSICAL WITHIN THE LAST YEAR AND HAS BEEN DECLARED HEALTHY TO PARTICIPATE IN CAMP ACTIVITIES. I ALSO ACKNOWLEDGE THAT I HAVE HAD SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTAND ITS PURPOSE, MEANING AND INTENT AND AGREE WITH IT.

\_\_\_\_\_  
(PARTICIPANT'S SIGNATURE) (DATE) (PRINT NAME)

The undersigned \_\_\_\_\_ does hereby represent that he/she is, in fact, the parent or legal  
(Parent or Legal Guardian's Name)  
guardian of \_\_\_\_\_ and acting in such capacity agrees to the terms and conditions of the above  
(Participant's Name)  
stated waiver and release. \_\_\_\_\_  
(Signature of parent or legal guardian) (DATE)

PRINT NAME: \_\_\_\_\_ RELATIONSHIP TO MINOR: \_\_\_\_\_