



Birthday Party Consent, Photo Release & Waiver

Date: _____ **Event Name:** _____

Childs Name: _____ **DOB:** _____

Parent/Guardian's Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Boxing and kickboxing courses offered by UFC GYM Mamaroneck, DBJC Inc. and its owners, employees, instructors (collectively "Fitness Center") will involve sparring and physical contact with other individuals and/or heavy bags, which may result in personal injury. Other programs offered by the fitness center, including Weight Lifting, Aerobics, Marital Arts, Wrestling, Cycling, and other events also present a risk of personal injury to the participant (you). By signing below, I am acknowledging my intent to release, waive and discharge the Fitness Center from any claim or liability for injury to my person, my children or other minor person for whom I am responsible, hereafter occurring at or around the Fitness Center. Accordingly, I, for myself and my children, and for my or their successors, personal representatives, and assigns, hereby (1) release and waive any claims and causes of action against the Fitness Center for personal injury, loss and/or consequential damage to me, my children, or other person for whom I am responsible, resulting from future passive or active negligence of the Fitness Center in operation, management or supervision of the Fitness Center, and (2) agree to indemnify, defend and hold the Fitness Center free and harmless from any cost, loss or liability arising out of any injury to me, my children, or other person for whom I am responsible in or around the Fitness Center proximity resulting from negligence of the Fitness Center.

The Fitness Center has my permission to use my or my child's photograph publically to promote the gym. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

I agree to these Terms & Conditions.

Parent/Guardian's Name: _____

Relationship to Participant: _____

Parent/Guardian's Signature: _____ **Date:** _____

914.835.4269
ufcgymevents@gmail.com
300 Waverly Avenue, Mamaroneck, New York 10543