

## **LEGALHOOPS INC., RELEASE OF LIABILITY**

I, hereby, acknowledge and declare that I willingly and voluntarily assume all risks and hazards associated with participating in any activities, events, or programs offered by LegalHoops. By submitting this Release of Liability form, I acknowledge that I have carefully read and fully understood its contents, and I agree to be bound by its terms and conditions.

### **1. Assumption of Risk:**

I acknowledge that participating in any activities organized by LegalHoops involves certain risks, including but not limited to physical injuries, property damage, loss, or even death. I understand that these risks may arise from the nature of the activity itself, any equipment used, or the actions or negligence of other participants, coaches, staff members, or third parties.

### **2. Release of Liability:**

I hereby release, discharge, absolve, and agree to hold harmless LegalHoops, its owners, operators, employees, volunteers, independent contractors, and agents from any claims, demands, actions, legal proceedings, damages, liabilities, costs, and expenses whatsoever (including attorney fees) arising out of or related to any injuries (whether physical or emotional), property damage, loss, or death that may occur as a result of your participation in any activities organized by LegalHoops, whether caused by the negligence of LegalHoops, its employees, agents, or other participants, or otherwise.

### **3. Indemnification:**

I agree to indemnify and hold harmless LegalHoops from any liabilities, costs, expenses, damages, or claims made by any third party, including but not limited to other participants, spectators, or property owners, arising out of or related to my involvement in any activities organized by LegalHoops.

### **4. Medical Treatment:**

I acknowledge that LegalHoops does not provide medical insurance coverage for you, and you are solely responsible for any medical costs incurred due to any injuries or damages sustained during your participation in any activities organized by LegalHoops. Should the need arise, you authorize LegalHoops, its employees, or agents to seek and approve medical treatment on your behalf.

### **5. Law and Jurisdiction:**

This Release of Liability shall be governed by and construed by the laws of Indiana/USA, without regard to conflict of laws principles. Any legal action or proceeding arising out of or related to this Release of Liability shall be filed in the courts located within the jurisdiction of Elkhart County, Indiana/USA.

### **6. Entire Agreement:**

This Release of Liability form constitutes my agreement with LegalHoops. It supersedes any prior or contemporaneous agreements, understandings, or oral or written representations regarding the subject matter hereof.

You affirm that you are at least 18 years of age and competent to sign this Release of Liability form. You freely and voluntarily agree to be bound by its terms and conditions and understand that you are giving up substantial legal rights by signing and submitting this form.

**Participant's Name Print:**\_\_\_\_\_

**Participant's Signature:** \_\_\_\_\_

**Date Signed:** \_\_\_\_\_