



Activity Waiver, Release, and Assumption of Risk Agreement

Updated 10/21/25

By signing below, the Participant — or the parent, guardian, or custodian of a minor child participant (age 17 or younger) — acknowledges and voluntarily agrees to the following terms regarding participation in any program, activity, or event held at or sponsored by The Grove Regional Community Center (“The Grove”):

1. **Assumption of Risk:** I understand that participation in physical activity, exercise, recreation, or other programs at The Grove involves inherent risks, including but not limited to injury, illness, or damage to personal property. I voluntarily assume all risks associated with participation for myself (or my minor child).
2. **Health and Fitness Acknowledgment:** I affirm that I (or my minor child) am physically capable of participating safely in The Grove’s activities and understand that I am responsible for my own health and actions while participating. I will inform staff of any relevant medical conditions prior to participation.
3. **Waiver and Release of Liability:** In consideration for being permitted to participate in activities at The Grove, I hereby waive, release, and discharge The Grove Regional Community Center, its owners, board members, employees, agents, volunteers, insurers, and affiliates (collectively, “The Grove Parties”) from any and all claims, demands, or causes of action arising out of participation in any activity or program, including those resulting from the negligence of The Grove Parties.
4. **Indemnification:** I agree to indemnify and hold harmless The Grove Parties from and against any claims, damages, or expenses (including attorney’s fees) arising out of my participation or that of my minor child.

See next page for participant signature collection.

*Posted in the Gymnasium info window or with Program Instructors for all activities on site.

***Liability Waiver Signature(s) to be renewed annually for recurring participants or seasonal programs.*

Participant Signature:

I have read the ‘Participant Waiver, Release, and Assumption of Risk Agreement’, fully understand its terms, and sign it freely and voluntarily.

Participant Full Name (Printed)	Participant Email	Participant or Guardian Signature	Date	Emergency Contact Name & Phone

***Liability Waiver Signature(s) to be renewed annually for recurring participants or seasonal programs.*