- 1.0 and forever discharge, and covenant not to sue MMA, its governing board, officers, agents, employees (hereinafter collectively referred to as "releasees"), from and against any and all liability for any harm, injury, damage, claims, demands, actions, cause of action, costs, and expenses of any nature that I may have or that may hereafter accrue to me, arising out of or related to any loss, damage, or injury, including but not limited to, suffering and death, that may be sustained by my child or by any property belonging to my child, whether caused upon, or in transit to or from the premises where the activity, or any adjunct to the activity occurs, or is being conducted.
- 2.0 I understand and agree that Releases do not have medical personnel available at the location of the activity. I agree and hereby grant Releases permission to authorize emergency medical treatment, if necessary, and that such action by Releases shall be subject to the terms of this document. I understand and agree that Releases assume no responsibility for any injury or damage which might arise out of or in connection with such authorized emergency medical treatment.
- 3.0 In signing this Release, I acknowledge and represent that I have fully informed myself of the content of the foregoing by reading it before I sign it, and I understand that I sign this Release as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written statement, have been made. I understand that MMA does not require my child to participate in the Activity, but I want my child to do so, despite the possible risks and despite this Release. I further state that I am at least eighteen (18) years of age and fully competent to sign this Release; and that I execute this Release for full, adequate and complete consideration fully intending to be bound by the same. I further state that there are no health-related reasons or problems which preclude or restrict my child's participation in the Activity, and that I have adequate health insurance to provide for and pay any medical costs that may be attendant as a result of injury to my child.
- 4.0 I further agree that this Release shall be construed in accordance with the laws of the State of Utah. If any term or provision of this Release shall be held illegal, unenforceable, or in conflict with any governing law, the validity of the remaining portions shall not be affected thereby.

I have executed this Release this	Day of	(month),	_(Year).
THIS IS A RELEASE OF LEGAL RIGH UNDERSTAND BEFORE SIGNING.	TS. READ AN	D BE CERTAIN YOU	ñ
PARENT/GUARDIAN OF PARTICIPANT			
(Print Name)			
(Signature)			
	(Date)		