



The Friendship Circle

B”H

1074 Hope St., Suite 201 * Stamford, CT, 06907
www.FriendshipCT.com
Malya@FriendshipCT.com

Medical & Emergency Release

My son/daughter has my permission to attend Friendship Circle events. I agree not to hold Friendship Circle, their partners, principals, directors, officers, affiliates, agents, employees, contractors, representatives, members, all individuals and entities acting in concert with Friendship Circle and any and all volunteers in any way associated with Friendship Circle. (hereinafter “Friendship Circle”) liable for any accident, loss or theft that may occur during the course of an event. I hereby give my permission to the physician selected by the Friendship Circle to hospitalize, and/or secure necessary treatment or anesthesia for my child, as named above, in the event that I cannot be reached in an emergency. I hereby give my permission that paramedics may transport my child to the nearest hospital, if necessary. I have indicated any pertinent medical information above. I agree to the terms and conditions of this application.

Liability Waiver

I will not hold Friendship Circle liable for any accidents, injuries, damage or fatalities which may occur in transit to/from aforementioned events

I also waive all rights to sue Friendship Circle for any of the above mentioned incidents which may occur in transit.

BY AGREEING TO THIS WAIVER, I/WE FREELY ACCEPT AND FULLY ASSUME RESPONSIBILITY FOR ALL SUCH DANGERS AND RISKS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR LOSS RESULTING THEREFROM.

IN CONSIDERATION OF UTILIZING THE FRIENDSHIP CIRCLE’ FRIENDSHIP CIRCLE FACILITIES, MONKEY BARS AND CHEESE PIT, AND FOR OTHER GOOD AND VALUABLE CONSIDERATION, I/WE HEREBY AGREE AS FOLLOWS:

1. TO WAIVE ANY AND ALL CLAIMS for personal injury including death, illness, property damage, and negligence that I/we may have against Friendship Circle,
2. TO RELEASE THE FRIENDSHIP CIRCLE FROM ANY AND ALL LIABILITY for any loss, damage, injury, death, medical or other expense that I/we may suffer or that any other party may suffer as a result of my use of Friendship Circle’ facilities, Monkey Bars and cheese pit or in my participation in the sports of Monkey Bars and cheese pit and other Friendship Circle activities, due to any cause whatsoever.
3. TO HOLD HARMLESS AND INDEMNIFY THE FRIENDSHIP CIRCLE from any and all loss, damages, costs, expenses, claims, liability and obligation for any property damage or personal injury to any third party resulting from my use of Friendship Circle’s facilities, Monkey Bars and cheese pit or in my participation in the sports of Monkey Bars and cheese pit and other Friendship Circle activities, including but not limited to attorney fees and costs.



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4. THIS RELEASE OF LIABILITY SHALL BE EFFECTIVE AND BINDING upon my heirs, next of kin, executors, administrators, successors, and assigns in the event of my personal injury including death, illness, and/or property damage.

5. I/WE ADDITIONALLY AGREE not to take unreasonable risks while participating in Monkey Bars and cheese pit, and other of Friendship Circle’ activities, including but not limited to attempting skills or tricks that I am not qualified to perform safely or causing any other participants/spectators unreasonable risk of harm. I/we agree to follow all rules set forth by the Friendship Circle with respect to using the Monkey Bars and cheese pit.

I/WE HEREBY CERTIFY THAT I/we am covered by my own medical insurance, and that I/we have read and understand this Release of Liability prior to signing it, and I/we am aware that by signing this Release of Liability I/we am waiving certain legal rights which I/we or my heirs, next of kin, executors, administrators, successors, and assigns may have against the Friendship Circle.

Friendship Circle shall have the right to impose any additional conditions which, in the opinion of the Friendship Circle, will further the intent and legal rights and waivers provided herein.

This liability waiver is made and executed in the State of Connecticut and shall be governed by, enforced in and construed in accordance with the laws of the State of Connecticut.

I/we acknowledge that in executing this waiver, I/we are not relying on any inducements, promises, or representations made by the Releases.

X: _____
Signature

Print name: _____

Date: ___/___/20___