

ASSUMPTION OF RISK, WAIVER, AND RELEASE AGREEMENT

I understand that by allowing my child/player to participate in the Elite Training By Trent training activities, he/she may be involved in physical activities that inherently involve risks including increased heart activity and the chance of musculoskeletal injury. By enrolling my child/player, I ensure that such individual is physically and mentally able to participate in all of the Elite Training By Trent training activities, he/she has been examined by a licensed medical physician within one (1) year prior to attending these training sessions, and he/she has no limiting physical conditions that would preclude involvement in the training program. I voluntarily agree to assume full and complete responsibility for any and all risks or loss, accidents, property damage, or personal injury (including death) that may be sustained by my child/player arising from his/her participation in this training. I understand that Trent Morgan, Elite Training By Trent, or employees, representatives, independent contractors working for or in partnership with Elite Training By Trent, or the property where the session is held and any or all of its officials shall not be held responsible in whole or in part for any accidents, loss, property damage, or personal injury (including death) arising out of or in connection with participation in this program. I hereby waive, release, discharge, and hold harmless Trent Morgan, Elite Training By Trent, or employees, representatives, independent contractors working for or in partnership with Elite Training By Trent, or the property where the session is held and any or all of its officials from any and all claims, actions, causes of action, costs, and liability arising out of or related to any risks or loss, accidents, property damage, or personal injury (including death) sustained by my child/player arising out of or in connection with his/her participation in this training. In the event of an emergency, I authorize Elite Training By Trent to exercise its judgment in the treatment of said player by a medical authority. By signing this assumption of risk, waiver, and release, I acknowledge that I have read and fully understand and agree to all of its terms.

Parent or Guardian Signature

Date