

# RELEASE OF LIABILITY FOR PARTICIPANTS



## READ BEFORE SIGNING

IN CONSIDERATION OF \_\_\_\_\_ my child/ward, being allowed to participate in any way in the Spartan Wrestling Program related events and activities, undersigned acknowledges, appreciates, and agrees that:

The risk of injury to my child from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,

FOR MYSELF, PARTNER, SPOUSE, AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and,

I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention of the nearest coach immediately; and,

I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE AND HOLD HARMLESS** Spartan Amateur Sports: its directors, officers, officials, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), **WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE**, to the fullest extent permitted by law.

I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, **HEREBY INDEMNIFY AND HOLD HARMLESS** all the above Releasees from any and all liabilities incident to my involvement or participation in these programs, **EVEN IF ARISING FROM THEIR NEGLIGENCE**, to the fullest extent permitted by law.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

## UNDERSTANDING OR RISK

I understand the seriousness of the risks involved in participating in this program, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

\_\_\_\_\_  
**Parent/Guardian's Name**

\_\_\_\_\_  
**Parent/Guardian's Signature**

\_\_\_\_\_  
**Athlete's Name**

\_\_\_\_\_  
**Athlete's Signature**

\_\_\_\_\_  
**Date**

## HYGIENE POLICY



Due to the nature of our sport it is our Policy that all athletes must;

- Shower after practice (at our facility for those athletes grades 9 and above, no exceptions! Children younger than this age must shower immediately after returning home).
- Bring a clean set of clothes for practice. All Ages, no exceptions. Athletes are not permitted to leave for home in the clothes they practiced in. **ABSOLUTELY NO EXCEPTIONS!**
- Have dedicated indoor-only-shoes for on the mat.
- Wipe off soles of shoes before and after each practice with a disinfectant solution.
- Wear clean clothes at any school practices or meets.
- Be prepared at all tournaments or meets to shower afterwards, no matter what.

If an athlete must leave early it is their responsibility to inform the coaches so they can leave early to shower.

\_\_\_\_\_  
Parent/Guardian's Name

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Athlete's Name

\_\_\_\_\_  
Athlete's Signature

\_\_\_\_\_  
Date

## REFUND POLICY



**There is 30-day refund policy, which means you have 30 days after your first practice to request a refund. All refunds will be deducted the \$75 CAD Trial month pricing and any applicable credit/debit card transaction fees.**

**There are no refunds on AAWA memberships for any exceptions.**

**There will be no refunds for the one month trial.**

**All team apparel is custom, made-to-order, and will not be applicable for refunds for any reason.**

\_\_\_\_\_  
Parent/Guardian's Name

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

## SCHOOL TEAM POLICY



At Calgary Spartan Wrestling, we are strong proponents for the Calgary school wrestling systems at the junior high and high school levels. These programs are integral to keeping the sport alive and well in the City and Province. Now, more than ever, we as a club need to make sure that these systems are returning to sport with healthy numbers.

Athletes must not skip a school practice if there is club practice with a conflicting time.

No athlete will be permitted to compete at a club tournament representing our club if they have an active school program that they are not representing in the school system events.

This is a non negotiable policy for our club.

I \_\_\_\_\_, acknowledge and agree to cooperate fully with Spartan Wrestling's policy that when it comes to practices, school practice always takes priority over club practices, and by cooperating with this policy, I will help maintain the integrity of Calgary's school wrestling systems.

\_\_\_\_\_  
Parent/Guardian's Name

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Athlete's Name

\_\_\_\_\_  
Athlete's Signature

\_\_\_\_\_  
Date



## CALGARY SPARTAN WRESTLING

### MEDIA RELEASE FORM

**PARENTS/GUARDIANS MUST SIGN AND RETURN THE CONSENT FORM BEFORE FIRST PRACTICE ATTENDED**

Full Name of Student:

Parent/Guardian's Name:

Age Group:

Signature:

Date Signed:

Date Signed:

CALGARY SPARTAN WRESTLING ACTING UNDER SPARTAN AMATEUR SPORTS HAS MY PERMISSION TO USE/REUSE MY OR MY CHILD'S PHOTOGRAPH OR VIDEO FOOTAGE PUBLICLY TO PROMOTE THE CLUB. I UNDERSTAND THAT THE IMAGES MAY BE USED IN PRINT PUBLICATIONS, ONLINE PUBLICATIONS, PRESENTATIONS, WEBSITES, AND SOCIAL MEDIA. I ALSO UNDERSTAND THAT NO ROYALTY, FEE OR OTHER COMPENSATION SHALL BECOME PAYABLE TO ME BY REASON OF SUCH USE.

**I FULLY UNDERSTAND THE TERMS AND CONDITIONS ON THIS RELEASE FORM.**

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PARENT OR GUARDIAN'S NAME  
AND SIGNATURE

**PLEASE SPEAK TO CODY FAIRBURN IF YOU HAVE ANY QUESTIONS  
OR CONCERNS ABOUT THE CONSENT FORM.**

**WE RESERVE THE RIGHT TO USE THESE PHOTOS FOR OUR PUBLICATION. HOWEVER,  
WE WILL NOT IN ANY WAY USE THE PHOTOGRAPHS OR VIDEO FOOTAGE IN A  
MANNER THAT WOULD EXPLOIT OR CAUSE MALICIOUS REPRESENTATION.**