

Risk Waiver and Release of Liability for AUSBreaking

- 1. I understand that although AUSBreaking attempts to minimise any risk of personal injury within practical boundaries, accidents do happen and all physical activities carry the risk of personal injury.
- I acknowledge that there is an inherent risk of personal injury in physical activities
 that will be undertaken at the events and classes including but not limited to
 festivals, workshops and competitions as part of the opportunities provided and I
 accept that risk.
- 3. I agree to attend events and classes including but not limited to festivals, workshops and competitions and to undertake all activities and/or to participate in the above. In the case of an emergency, I authorise AUSBreaking, where it is impracticable to communicate with me, to arrange and receive such medical or surgical treatment as may be deemed necessary.
- I also undertake to pay or reimburse costs which may be incurred for medical attention, ambulance transport and medication whilst attending AUSBreaking classes and events.
- 5. In the event that any damage to equipment or facilities occurs as a result of my willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated with this action.
- 6. By signing this statement, I declare that I'm in good health, with no physical conditions that might prevent his/her/my participation in strenuous and rigorous activities and other training workshops and performances. If there is any kind of injury or medical conditions it is my responsibility to let AUSBreaking know.
- 7. During circumstances, AUSBreaking has had to adjust and stream classes online. I am completely aware that online breaking is distinctly different compared to participating in a class under a teacher's guidance. I hold myself fully responsible for my online participation and make sure that the place of practice is as safe as possible.



8. I acknowledge that I have carefully read this waiver and release form and completely understand that by signing this, it is a release of liability for the AUSBreaking.

Printed Name:	
Signature:	
Date:	
*If the participant is younger than 18 years of age, a parent or legal guardi on behalf of the participant, authorising this risk waiver and release of liab	_
Name of Participant:	
Age:	
Parent/Guardian Name:	
Parent/Guardian Signature:	



Date:			
Date.			