

ASSUMPTION OF RISK, WAIVER OF LIABILITY, AND INDEMNIFICATION AGREEMENT

Elite Defensive Line Academy, Nexo Services Incorporated

PARTICIPANT INFORMATION

Participant Name: _____ Age: _____

Phone: _____ Email: _____

Emergency Contact Name: _____ Emergency Contact Phone: _____

ACKNOWLEDGMENT AND ASSUMPTION OF RISKS

I understand and acknowledge that participation in defensive line training activities conducted by Elite Defensive Line Academy and Nexo Services Incorporated (collectively referred to as "the Company"), under the instruction of Warren Walker and other authorized trainers, involves inherent risks and dangers that could result in serious personal injury, permanent disability, or death.

These risks include, but are not limited to:

- Physical contact with trainers, other participants, and equipment during drills and exercises
- Collisions, falls, and impacts with other participants, equipment, or playing surfaces
- Use of training equipment including blocking sleds, tackling dummies, agility chutes, resistance bands, weights, and other specialized football training apparatus

I acknowledge that this list is not exhaustive and that other risks, both known and unknown, anticipated and unanticipated, may also result in injury, illness, or death.

I voluntarily assume all risks associated with participation in these training activities.

WAIVER AND RELEASE OF LIABILITY

In consideration for being permitted to participate in training activities with Elite Defensive Line Academy, I HEREBY VOLUNTARILY AGREE TO RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE Nexo Services Incorporated, Warren Walker individually, Elite Defensive Line Academy, and their respective officers, directors, employees, agents, contractors, representatives, successors, and assigns (collectively "Released Parties") from any and all liability, claims, demands, actions, and causes of action whatsoever, directly or indirectly arising out of or related to any loss, damage, injury, illness, or death that may be sustained by the Participant while participating in training activities or while on the premises where training occurs, including travel to and from such premises.

This release applies to liability arising from:

- The negligence or fault of the Released Parties
- The condition of facilities, equipment, or premises used for training
- The actions or omissions of other participants or third parties

I UNDERSTAND THAT THIS WAIVER RELEASES THE RELEASED PARTIES FROM LIABILITY FOR THEIR OWN NEGLIGENCE.

INDEMNIFICATION AND HOLD HARMLESS

I agree to INDEMNIFY, DEFEND, and HOLD HARMLESS the Released Parties from and against any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorney's fees, arising out of, connected with, or resulting from my participation in training activities, including but not limited to any claims brought by co-participants or other third parties, to the fullest extent permitted by law.

MEDICAL TREATMENT AUTHORIZATION

I acknowledge that the Company does not provide medical insurance coverage for participants. I certify that the Participant is physically fit and has no medical conditions that would prevent safe participation in strenuous athletic training. I authorize the Company and its representatives to obtain emergency medical treatment for the Participant if necessary, and I agree to be financially responsible for any costs incurred as a result of such treatment. I understand that I should consult with a physician before the Participant begins any strenuous physical activity, and I assume all responsibility for the Participant's health and physical condition.

PHOTOGRAPHIC/VIDEO RELEASE

I grant permission to the Company to use photographs, video recordings, or other media of the Participant taken during training activities for promotional, educational, or marketing purposes without compensation.

BINDING ARBITRATION

Any dispute, controversy, or claim arising out of or relating to this Agreement, or the breach thereof, or arising out of participation in training activities shall be settled by binding arbitration in accordance with the rules of the American Arbitration Association. The arbitration shall take place in Texas. Judgment on the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof. Each party shall bear its own costs and attorney's fees in any arbitration proceeding.

GENERAL PROVISIONS

Severability: If any provision of this Agreement is found to be unenforceable or invalid, that provision shall be limited or eliminated to the minimum extent necessary so that this Agreement shall otherwise remain in full force and effect.

Governing Law: This Agreement shall be governed by and construed in accordance with the laws of the State of Texas, without regard to its conflict of law provisions.

Entire Agreement: This Agreement constitutes the entire agreement between the parties and supersedes any prior understanding or representation of any kind preceding the date of this Agreement.

Acknowledgment of Understanding: I have read this entire Agreement, fully understand its terms, and understand that I am giving up substantial rights, including the right to sue. I acknowledge that I am signing this Agreement freely and voluntarily, and intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

PARTICIPANT SIGNATURE (18 Years or Older)

I certify that I am 18 years of age or older.

Participant Signature: _____

Printed Name: _____

Date: _____

PARENT/GUARDIAN SIGNATURE (For Participants Under 18 Years)

I certify that I am the parent or legal guardian of the above-named Participant who is under 18 years of age. I have read and understood this Agreement and agree to its terms on behalf of the Participant. I understand that I am giving up substantial rights on behalf of the Participant, including the right to sue. I further agree to be bound by this Agreement in my individual capacity, including the assumption of risk, waiver, release, and indemnification provisions.

Parent/Guardian Signature: _____

Printed Name: _____

Relationship to Participant: _____

Date: _____

Elite Defensive Line Academy
Nexo Services Incorporated
Warren Walker, Owner/Trainer