

SPORTS WAIVER AND CONSENT FORM

To: Parents/Guardians and Athletes

From: MGDynamics, LLC

Participant Information

PLAYER NAME	
DATE OF BIRTH	
PHONE NUMBER	
EMERGENCY CONTACT	
EMERGENCY CONTACT PHONE (if applicable)	
EMAIL ADDRESS	

Acknowledgment of Risks

I, the undersigned, understand that participation in MGDynamics, LLC trainings involves inherent risks, including but not limited to physical injury. I acknowledge that these risks may arise from the activity itself, the actions of others, or the condition of facilities and equipment.

Assumption of Risk

I voluntarily assume all risks associated with participation in this sport/activity, whether known or unknown, and accept full responsibility for any injury or damage that may occur to me or my property.

Release of Liability

In consideration of being permitted to participate, I hereby release, waive, and discharge MGDynamics, LLC, its officers, coaches, volunteers, and affiliates from any and all liability, claims, or causes of action arising out of my participation, including those caused by negligence.

Medical Consent

I certify that I am physically fit to participate in this sport/activity and have not been advised otherwise by a medical professional.

Signature

I have read and understood this waiver and consent form. I sign it voluntarily and agree to be bound by its terms.

Participant Signature: _____

Date: _____

Parent/Guardian Consent (If Participant is a Minor)

I, as the parent or legal guardian of the above-named minor, have read and understood this waiver and consent form. I give my permission for my child to participate and agree to the terms on their behalf.

Parent/Guardian Name: _____