

**Tap House MMA – Participant Waiver &
Release Agreement**

Owner: [Grayson T Allen]

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Page 1 – Voluntary Participation

I acknowledge that my participation in Tap House MMA activities (boxing, Jiu-Jitsu, kickboxing, Muay Thai) is entirely voluntary. I understand I may withdraw from participation at any time without penalty or obligation.

Participant Signature: _____ Date: _____ Initials: _____

Parent/Guardian Signature (if <18): _____ Date: _____ Initials: _____

Assumption of Risk

I understand that participation in martial arts activities involves inherent risks, including but not limited to bruises, sprains, fractures, concussions, serious injury, or death. I freely accept and assume all such risks.

Participant Signature: _____ Date: _____ Initials: _____

Parent/Guardian Signature (if <18): _____ Date: _____ Initials: _____

Rules & Conduct

I agree to follow all rules and regulations established by Tap House MMA. I understand that failure to comply with rules may result in suspension or removal from participation. I acknowledge that the rules are final and non-negotiable.

Participant Signature: _____ Date: _____ Initials: _____

Parent/Guardian Signature (if <18): _____ Date: _____ Initials: _____

Page 2– Denial of Entry / Private Gym

I acknowledge that Tap House MMA is a **private, invite-only** gym. I understand that Tap House MMA reserves the right to **deny** participation to any individual at any time for any reason deemed appropriate by the gym management.

Participant Signature: _____ Date: _____ Initials: _____

Parent/Guardian Signature (if <18): _____ Date: _____ Initials: _____

Payment Terms

I understand that all classes are paid per session, and all fees must be paid prior to the start of class.

Pricing:

- \$25 per adult per session
- \$25 per youth (under 18) per session
- \$40 for 1 adult + 1 youth
- Private sessions: price varies, non-negotiable

Participant Signature: _____ Date: _____ Initials: _____

Parent/Guardian Signature (if <18): _____ Date: _____ Initials: _____

Page 3 – Martial Arts Risks

I understand that the risks of participating in martial arts may include, but are not limited to:

Boxing: bruises, fractures, concussions

Jiu-Jitsu: joint injuries, bruises

Kickboxing/Muay Thai: sprains, fractures, concussions

I acknowledge that these risks are not exhaustive and other injuries may occur.

Participant Signature: _____ **Date:** _____ **Initials:** _____

Parent/Guardian Signature (if <18): _____ **Date:** _____ **Initials:** _____

Medical Clearance

I affirm that I am physically fit and have no medical conditions that would prevent safe participation in Tap House MMA activities. I release Tap House MMA from any responsibility for injury or illness.

Participant Signature: _____ **Date:** _____ **Initials:** _____

Parent/Guardian Signature (if <18): _____ **Date:** _____ **Initials:** _____

Waiver & Release

I hereby release Tap House MMA, its instructors, staff, and affiliates from any liability for injuries, disability, death, or property damage resulting from my participation in any Tap House MMA activities.

Participant Signature: _____ **Date:** _____ **Initials:** _____

Parent/Guardian Signature (if <18): _____ **Date:** _____ **Initials:** _____

Page 4 – Indemnification

I agree to indemnify and hold harmless Tap House MMA against any and all claims, actions, damages, liabilities, and expenses arising from my participation or the participation of my child.

Participant Signature: _____ **Date:** _____ **Initials:** _____

Parent/Guardian Signature (if <18): _____ **Date:** _____ **Initials:** _____

Communicable Disease / COVID-19

I acknowledge the risk of exposure to communicable diseases, including COVID-19. I voluntarily assume all such risks and release Tap House MMA from any liability associated with exposure during participation.

Participant Signature: _____ **Date:** _____ **Initials:** _____

Parent/Guardian Signature (if <18): _____ **Date:** _____ **Initials:** _____

Media Release :

I grant permission to Tap House MMA to take photographs and/or videos of me/my child for promotional/ training/ safety purposes. I understand that I will not receive any compensation for use of these materials. I understand that I will not share or disclose any media, visual, or written material with any person, or on any media platform regarding contents of any class.

Participant Signature: _____ **Date:** _____ **Initials:** _____

Parent/Guardian Signature (if <18): _____ **Date:** _____ **Initials:** _____

Page 5 – Binding Agreement :

I acknowledge that I have read and fully understand this agreement. I sign voluntarily and understand that this is a legally binding contract.

Participant Signature: _____ **Date:** _____ **Initials:** _____

Parent/Guardian Signature (if <18): _____ **Date:** _____ **Initials:** _____