

PLEASE READ CAREFULLY. BY SIGNING THIS DOCUMENT, YOU CHOOSE TO WAIVE LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE.

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH Dallas Unique, Inc., Dallas Unique Dance Company, (DUDC), Dallas Unique Fitness & Wellness, (DUFW), Dallas Unique Modeling Agency, (DUMA), Dallas Unique Authentic Ladies, (DUAL), and/or Dallas Unique College Connection, (DUCC), including by way of example and not limitation, any risks including death that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit, and am willing participating in organization activities, and have reasons no problems which preclude my participation in this organizations activities.

I acknowledge that this Accident Waiver and Release of Liability, Assumption of Risk, and Indemnity Agreement for will be used by the event holders, sponsors, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said organizational activities. In consideration of my application and permitting me to participate in this organizations activities, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

- (A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from activities and events THE FOLLOWING ENTITIES OR PERSONS: Dallas Unique, Inc., Dallas Unique Dance Company, (DUDC), Dallas Unique Fitness & Wellness, (DUFW), Dallas Unique Modeling Agency, (DUMA), Dallas Unique Authentic Ladies, (DUAL), and/or Dallas Unique College Connection, (DUCC), and/or their directors, officers, employees, volunteers, representatives, and agents, and the activity holders, and sponsors;
- (B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this organizations activities, whether caused by the negligence of release or otherwise

I acknowledge that Dallas Unique, Inc. and sub entities of Dallas Unique, Inc. and their directors, officers, volunteers, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I acknowledge that all activity may involve a test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, lack of hydration, and actions of other people including, but not limited to, participants, volunteers, monitors, and/or producers of the organizations activities. These risks are not only inherent to participants, but are also present for volunteers.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during activities.

I understand while participating in organizations activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the Dallas Unique, Inc. organization, producers, sponsors, organizers, and assigns.

The Accident Waiver, Release of Liability, Assumption of Risk, and Indemnity Agreement Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

| Participant's Signature | Print Name | Date | Age |
|---------------------------|-----------------------------------------|---------------------|-----|
| Parent/Guardian Signature | Association to Participant | Date | |
| (If participant i | is under 18 vears old. Parent or Guardi | an must also sign.) |) |