

LIABILITY WAIVER

Participant Name: _____

Participant Address: _____

Phone: _____

E-Mail: _____

Date(s) of Use: _____

Group Name: _____

1. Participant has voluntarily chosen to participate in activities (the "Activity") to take place at the premises of Zen Studies Society, Inc. ("DBZ"), located at 223 Beecher Lake Road, Livingston Manor, New York 12758 on the Date(s) of Use indicated above.
2. Participant understands and agrees that there may be health and safety hazards (including, without limitation, any and/or all illness, and/or accident, and/or injury, and/or symptoms, and/or or death and/or property damage associated with the Activity, and Participant knowingly assumes such risk.
3. Participant understands that DBZ's property insurance only covers property that is owned by the DBZ. Participant further understands that DBZ's property insurance does not cover damage to or theft of Participant's personal property. Participant accepts all risks of personal property damage or theft of personal property and understands that DBZ will not be responsible for such damage or theft.
4. Participant certifies that Participant has no medical condition, including symptoms of COVID-19 or testing positive for COVID-19 within 10 days of commencement of the Activity, that would preclude or restrict Participant's participation in the Activity or increase the risk to Participant or other participants participating in the Activity, and that Participant has adequate health insurance protection to cover the expense of any unforeseen illness, accident or injury. Participant understands that DBZ does not carry insurance that will cover any illness or injury sustained by Participant during the Activity. In addition, DBZ is not responsible for any medical bills, including without limitation copays and deductibles, the Participant may incur in conjunction with Participant's participation in the Activity. Participant recognizes that DBZ is not obligated to attend to any of Participant's medical or medication needs, and Participant assumes all risk and responsibility therefore. Participant agrees to only participate in the Activity for the length of time that Participant is comfortable, can accomplish safely, and is within Participant's ability and skill level. Participant will immediately end participation and seek medical attention if Participant becomes injured or ill during the Activity.

5. Participant authorizes DBZ, at the DBZ's sole discretion, to administer to or seek for Participant first aid and other emergency medical services, or transportation.
6. Participant will engage in the Activity in a prudent and cautious manner. Participant hereby covenants and agrees not to (i) act in any way which shall interfere with the lawful running or operation of the Activity or equipment used in connection with the Activity or (ii) engage in any harmful conduct or willfully or negligently engage in any type of conduct which contributes to or causes injury to any person. Participant understands and agrees that Participant shall abide by: (i) all policies, rules, and regulations of DBZ and (ii) all rules, directions, and precautions issued by DBZ or its representatives, by any associated individuals or organizations, or state, local or Federal governmental authorities. Participant will wear appropriate attire and safety/protective equipment at all applicable times.
7. In consideration of participating in the Activity, in full recognition and appreciation of the dangers and hazards inherent in participating in the Activity, Participant hereby agrees to assume all of the risks and responsibilities surrounding participation in the Activity. Participant, for participant's self, heirs, and personal representative(s), hereby agrees to defend, hold harmless, indemnify, release, and forever discharge DBZ, its directors, officers, agents, and employees from and against any and all claims, demands, and actions or causes of action, on account of damage to personal property, loss of personal property, or personal illness or injury, including death, which may result from such participation in the activity, including claims based upon the negligence of DBZ, its directors, officers, and agents.

Participant certifies Participant has read and understands the above statements and that they are true and accurate, and that the signing of this Liability Waiver is completely voluntary.

Participant's Signature: _____ Date: _____

Participant's Emergency Contact Printed Name: _____

Relationship to Participant: _____

Phone Number: _____ Email: _____

If Participant is Under the Age of 18, the Signature of a Parent or Legal Guardian is Required

Parent/Legal Guardian's Printed Name: _____

Parent/Legal Guardian's Signature: _____ Date: _____