

CANINE FITNESS WORKSHOP
Seattle TTouch LLC
LIABILITY RELEASE, WAIVER AND INDEMNIFICATION, AND
EXPRESS ASSUMPTION OF RISK

This Waiver and Release is required from each Attendee to all Seattle TTouch LLC ("STT") canine training courses presented by Lori Stevens. **THIS WAIVER AND RELEASE SPECIFICALLY INCLUDES ANY AND ALL NEGLIGENCE, BY WAY OF ACTION OR INACTION, BY ANY AGENTS OR ASSISTANTS of Seattle TTouch LLC, including Lori Stevens, Grisha Stewart, and Empowered Animals, LLC.**

1. **THIS IS A LEGALLY BINDING RELEASE, WAIVER, INDEMNIFICATION OF LIABILITY, AND EXPRESS ASSUMPTION OF RISK.** Read it carefully before signing. **IN CONSIDERATION FOR MY BEING ALLOWED TO PARTICIPATE IN THE ACTIVITIES** based on my representation of SIGNING UP with a dog who is healthy enough to participate in this training. **I hereby acknowledge and understand the inherent extreme risks in all human and animal physical conditioning disciplines and activities, including without limitation, all fitness training programs and use of equipment related thereto ("Activities").** I also realize that risks may be caused by bad decision-making, inattention, actions of other participants, misuse or failure of equipment and freakish accidents that cannot be foreseen. I acknowledge that the above list is not inclusive of all possible risks associated with the Activities listed above and is provided by way of example only, and I agree that said list in no way limits the extent or reach of this release.

2. **I VOLUNTARILY ASSUME ALL RISKS IN CONNECTION WITH THE ACTIVITIES, WHETHER FORESEEN OR UNFORESEEN, WITH FULL KNOWLEDGE AND APPRECIATION OF THE DANGER AND RISK INVOLVED.** By signing this Agreement, it is my intent to personally accept full responsibility for and assume all risk of injury or death. I understand and agree that STT will not provide any insurance, or benefits, including workman's compensation benefits, on behalf of any participant in the Activities.

3. I am unaware of any physical or mental condition that would (a) prevent me from safely participating in the Activities or (b) endanger my health or safety or the health and safety of others due to my participation in one or more Activities. I attest that I am physically fit and competent to participate in the Activities, and that all of my questions regarding the Activities have been answered to my satisfaction. I further attest that I am at least 18 years of age and otherwise legally competent to sign this Agreement.

4. I, on behalf of myself, my family, heirs, successors, assigns, and anyone claiming any interest through me, hereby KNOWINGLY, INTENTIONALLY AND VOLUNTARILY WAIVE, RELEASE, INDEMNIFY AND AGREE TO HOLD HARMLESS STT, all landowners and/ or agencies on whose property (owned, leased or otherwise) the Activities take place, and all sponsors, and all officers, directors, employees, volunteers, agents, successors, assigns and representatives of STT (collectively referred to as the "Released Parties") FROM ANY AND ALL ACTIONS, SUITS, CLAIMS, DAMAGES, AND LIABILITY (INCLUDING ATTORNEY FEES AND COSTS), THAT I, my family, heirs, successors, assigns, and anyone claiming any interest through me, MAY HAVE FOR ANY DAMAGE, INJURY, PARALYSIS, LOSS, OR DEATH TO MYSELF OR ANY OTHER PERSON OR PROPERTY ARISING OUT OF MY PARTICIPATION IN THE ACTIVITIES, whether such damage, injury, paralysis, loss, or death results from NEGLIGENCE of any of the Released Parties or from some other cause.

5. I understand and agree that none of the Released Parties may be held liable or responsible in any way to me or my family, heirs successors, assigns, or anyone claiming any interest through me, and I have assumed all risks in connection with the Activities for any injury, death, or other damages that may occur as a result of my participation in the Activities or as a result of the negligence of any participant or party, including the Released Parties, whether passive or active. I understand and explicitly agree that neither I, my family, heirs, successors, assigns, or anyone claiming any interest through me, may bring any legal action whatsoever against any of the Released Parties as a result of any such damage, injury, paralysis, loss, or death to myself or any other person or property that arises out of my participation in the Activities.

6. This Agreement shall be governed by and interpreted under the laws of Washington state, without regard to conflict of laws provisions. If any lawsuit or claim is brought regarding of my participation in the Activities, I agree that jurisdiction and venue for such suit shall be in the state or federal courts located in Washington state, and hereby irrevocably waive any other jurisdiction or venue to which I or my estate might otherwise be

entitled. If any provision of this Agreement is or becomes invalid or unenforceable in whole or in part, such provision shall be deemed amended to conform to the requirements of the law so as to be valid and enforceable, or if it cannot be amended without materially altering the intention of the parties, it shall be stricken and the remainder of this Agreement shall remain in full force and effect.

7. I hereby affirm that I have read this Agreement in its entirety. I understand this liability release and express assumption of risk, and sign this Agreement voluntarily and of my own free will on behalf of myself and my heirs to evidence my agreement to each and every term and condition of this Agreement.

Signature: _____

Print Name: _____

Date: _____

Email: _____