

Parent's name _____ Character name of participant: _____

Emergency contact # _____ Unit _____

Dur-Demarion Medieval Combat Society
Nashville, TN
MINOR Waiver and Release of Liability
(Minors must have notarized signature of Parent/Legal Guardian)

Legal name of participant _____ Date of birth _____

Address _____

Telephone _____ E-mail address _____

Please list any serious health issues/problems _____

Description of Dur-Demarion Medieval Combat Society: Dur-Demarion combines fast-paced full-contact combat simulation with elements of live action role-playing. Combat in group melees or between individuals is similar to the battle scenes in movies like Braveheart and Gladiator, with the biggest difference being that Dur-Demarion "weapons" are well padded to prevent injuries. Dur-Demarion weapons are constructed to resemble Dark Age/Medieval swords, shields, spears, etc. and generally consist of soft foam layers bonded to a rigid core. Combatants may also become involved in grappling/wrestling. Dur-Demarion rules of combat are strictly enforced by heralds (referees) to ensure maximum safety along with maximum playability. As with any outdoor, intense contact sport, the possibility for injury exists. The types and likelihood of injury are similar to those in soccer, football, rugby, lacrosse, and as in these sports, severe injuries can occur.

WAIVER: In consideration of receiving permission from Dur-Demarion Medieval Combat Society (Dur-Demarion) to participate in any Dur-Demarion sponsored activity, event, tournament, contest, or meeting, the Undersigned assumes full responsibility for any bodily injury and/or property damage arising out of or related to my attendance and/or participation. I fully release Dur-Demarion, its members, participants, observers, officers, officials, owners and/or administrators of land upon which the event/activity is being held, and/or anyone administering emergency medical assistance from liability to myself, my assigns, heirs and next of kin for any injury to myself or damage to my property arising out of my attending/participating a Dur-Demarion event/activity. I hereby agree that if any time I feel any Dur-Demarion activity is unsafe, or if I observe unsafe behavior on the part of other participants/observers, I will immediately notify the appropriate Dur-Demarion officials and/or refuse to participate in or observe any further activities/events. The undersigned is aware of the risks and hazards inherent in participating in any activity, event, tournament, contest, or meeting of Dur-Demarion and elects voluntarily to participate, knowing that participation involves significant physical contact by others to his person and that such participation may entail a risk of injury.

This release shall be binding upon distributes, heirs, next of kin, executors and administrators of the Undersigned.

In signing the foregoing release, the Undersigned acknowledges and represents:

- (a) That he or she has read the above release, understands it, and signs voluntarily;
- (b) That he or she is over 18 years of age and of sound mind;
- (c) Undersigned represents that he or she has no physical or mental defects known to the Undersigned and unknown to the appropriate representative of Dur-Demarion that would endanger or harm the Undersigned while participating in any activity, event, tournament, contest, or meeting that Dur-Demarion participates in, sponsors, attends, or supervises
- (d) Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
- (e) I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
- (f) I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
- (g) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS both Dur-Demarion Medieval Combat Society and Belegarth, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
- (h) I understand that neither Dur-Demarion Medieval Combat Society nor Belegarth can be held liable for any exposure to the COVID-19 virus caused by misinformation on this form or the health history provided by each player.
- (i) By signing below, I agree to each statement above and release Dur-Demarion Medieval Combat Society, Belegarth, and any and all participants who can be proved to be truthful on this waiver from any and all liability for the unintentional exposure or harm due to COVID-19.

(j) I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

(k) That the undersigned has the legal capacity to sign on behalf of the minor participant listed above

Undersigned sign legal name here

Relationship to minor

Undersigned print legal name here

Phone (if different than minor)

Address (if different than minor)

Date

State of _____ City of _____

To Wit:

I hereby CERTIFY that on this _____ day of _____,

Personally appeared and made oath in due form of law that the matters and facts set forth

In the foregoing agreement are true and correct as therein stated and that said Agreement

Is in fact his/her act and deed and that (s) he has full understanding thereof. WITNESS my

hand and notarial seal:

NOTARY PUBLIC

My commission expiration date