



LIABILITY WAIVER, RELEASE, AND MEMBERSHIP AGREEMENT

TERMS, ASSUMPTION OF RISK, AND RELEASE

- **Assumption of Risk:** I acknowledge that table tennis involves physical activity, rapid movements, and competitive play that carry inherent risks of injury, including but not limited to sprains, strains, fractures, cardiovascular stress, and accidents involving equipment or facility surfaces. I voluntarily assume all risks associated with my participation at Sameh Awadalla Table Tennis Academy (SATTA).
- **Release and Indemnity:** In consideration of being allowed to use the facilities, equipment, and programs of SATTA, I hereby release, waive, discharge, and hold harmless Sameh Awadalla Table Tennis Academy, its owners, coaches, staff, and representatives from any and all liability, claims, or demands for personal injury, property damage, or wrongful death arising out of or related to my participation or presence at the academy.
- **Medical Fit and Care:** I certify that I am physically fit to participate in table tennis activities and have not been advised otherwise by a qualified medical professional. In the event of a medical emergency, I authorize SATTA staff to secure necessary treatment if I or my emergency contacts are unreachable.
- **Media Release:** I grant SATTA the absolute right and permission to use photographs, video recordings, or digital media taken of me during activities at the academy for promotional, marketing, and instructional purposes without compensation.

BY SIGNING BELOW, I CONFIRM THAT I HAVE READ AND FULLY UNDERSTOOD THIS DOCUMENT, APPRECIATE THE RISKS VOLUNTARILY ASSUMED, AND AGREE TO BE BOUND BY ALL ITS TERMS AND CONDITIONS. IF THE PARTICIPANT IS UNDER 18, A PARENT OR LEGAL GUARDIAN MUST SIGN.

X

Signature of Participant (or Parent/Guardian if under 18)

Date (MM/DD/YYYY)

Printed Name of Signatory

Relationship to Minor (if applicable)