

I, _____, hereby acknowledge and agree to the following, as a condition of **Healing Heart Ministries' Hula Hoop Stress Management Group**.

1. My involvement and/or participation in **Hoop Group** is voluntary, and I am acting under my own free will.
2. There is a risk of bodily harm or injury as a result of my participation. The risks arise from **Hula-hooping**.
3. There is the potential for risks and dangers that may not be obvious or reasonably foreseeable at this time.
4. I do not have any medical ailments, physical limitations, or mental disabilities that will affect my ability to participate in **Hoop Group**.
5. **Healing Heart Ministries** undertakes no direct legal or financial responsibility for my personal safety or well being when I am participating in **Hoop Group**.
6. I assume the risks, including, but not limited to, those outlined in Section 3 of this agreement.
7. I forever release **Healing Heart Ministries and all related participants** from any and all claims and causes of action that I or my representatives now have or may have in the future for personal injury, property damage or wrongful death occurring to me, arising out of participation in **Hoop Group**.
8. I am 100% liable for all medical expenses incurred as a result of any injury or property damage during my participation in **Hoop Group**.
9. In the event that any one or more of the provisions of this agreement shall be held to be invalid, illegal, unenforceable or in conflict with the law according to the jurisdiction of the state of **Alabama**, the remaining portions will not be invalidated, and shall remain in full force and effect.
10. This is a legally binding contract, but it is not meant to pronounce any claims or defenses that are legally prohibited.

I attest that I have read and understand this document, and agree to all the provisions listed above.

Participant Name

Participant Signature

Date

Witness Name

Witness Signature

Date:

I _____ agree to the following:

* not discussing any information pertaining to any group member with anyone (including my own family) or any other person(s) not a member of this group.

* not discussing any information pertaining to any group member in any place where it can be overheard by anyone not directly involved with the group.

* I will not release any information, in writing or orally, regarding any group member to any person(s).

By my signature below, I indicate that I have read carefully and understand this Agreement and that I agree to its terms and conditions.

Signature _____ Date _____