

EUROPEAN TENNIS SERVICE FZ-LLC

Ras Al Khaimah, United Arab Emirates

WAIVER AND RELEASE OF LIABILITY FORM

INSTRUCTIONS: Each player and/or parent/legal guardian must read this document carefully before signing. In consideration for participating in European Tennis Service FZ-LLC programs, events, training, activities, tournaments, and related travel, the undersigned agrees to the terms below.

1. Terms & Liability Agreement

- **Assumption of Risk:** Programs include on-court tennis drills, match play, physical conditioning, and athletic activities. I recognize and acknowledge the inherent risks associated with athletic participation. I voluntarily choose to participate (or permit my child to participate) and assume full responsibility for any risk of personal injury, illness, loss, or property damage.
- **Medical Fitness & Insurance:** I confirm that I / my child am/is in good physical condition with no medical restrictions that would prevent safe participation. I certify that I maintain adequate health/medical insurance to cover any injury or illness resulting from participation, and agree to cover all costs exceeding insurance limits.
- **Release & Discharge:** I hereby release, waive, and forever discharge European Tennis Service FZ-LLC, its owners, coaches, staff, court administrators, and affiliates from any and all claims, liabilities, demands, or causes of action arising out of or related to participation in any ETS programs or activities.

2. Media & Promotional Consent

Do you grant consent to European Tennis Service FZ-LLC to use photographic or video images taken during programs/events for promotional and marketing purposes?

[] YES, I grant consent [] NO, I do not grant consent

3. Participant & Contact Information

Participant's Full Name: _____ Date of Birth: _____

Parent / Legal Guardian Name (if under 18): _____

Address: _____

UAE Mobile No: +971 _____ WhatsApp No: +971 _____

4. Acknowledgment & Signature

By signing below, I acknowledge that I have read, understood, and voluntarily agree to all terms of this Waiver and Release of Liability Form.

Signature: _____ Date (DD/MM/YYYY): _____