

# BHUTANESE ULTIMATE FITNESS TEST

## BODY SHOW COMPETITION

### PARTICIPANT WAIVER & RELEASE OF LIABILITY

**Event Name:** Bhutanese Ultimate Fitness Test (Body Show Competition)

**Event Date:** 05/16/2026

**Event Location:** Akron, OH

**Organizer / Host:** Bhutanese Ultimate Fitness Test

#### 1. NATURE OF THE EVENT

I understand that the **Bhutanese Ultimate Fitness Test** is a **body show / physique display competition** involving posing, walking, standing, and light movement for presentation purposes only. The event does **not** include strenuous exercise, strength testing, or endurance challenges.

#### 2. ASSUMPTION OF RISK

I acknowledge that participation may involve minor risks such as slips, falls, dehydration, muscle discomfort, contact with others, or other unforeseen incidents. I knowingly and voluntarily assume **all risks**, whether known or unknown, associated with participating in or attending the event.

#### 3. RELEASE OF LIABILITY

In consideration of being permitted to participate, I hereby **release, waive, discharge, and agree to hold harmless:**

- **The City of Akron,**
- Its departments, officials, officers, employees, agents, and representatives,
- Location/place/hall of event
- Event organizers, volunteers, sponsors, and affiliates,

from **all liability, claims, demands, causes of action, or damages** arising out of or related to my participation or presence at the event, including injury, illness, property damage, or death, **whether caused by negligence or otherwise**, to the fullest extent permitted by law.

#### 4. MEDICAL ACKNOWLEDGMENT

I certify that I am in adequate physical condition to participate in this body show competition and that I have no medical condition that would prevent safe participation. I understand that I am responsible for monitoring my own health during the event.

I consent to emergency medical treatment if deemed necessary and accept full financial responsibility for any medical care received.

#### 5. INDEMNIFICATION

I agree to **indemnify and defend** the City of Akron and all released parties against any claims, damages, or expenses (including attorney fees) arising from my participation in the event.

#### 6. PHOTO, VIDEO & MEDIA RELEASE

I grant permission to event organizers and the City of Akron to photograph or record me during the event and to use such media for promotional, educational, or informational purposes without compensation.

#### 7. ACKNOWLEDGMENT & SIGNATURE

I acknowledge that I have carefully read this waiver, fully understand its contents, and voluntarily agree to its terms. I understand that by signing this document, I am giving up certain legal rights.

**Participant Name (Print):** \_\_\_\_\_

**Participant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Phone / Email:** \_\_\_\_\_

---

**FOR PARTICIPANTS UNDER 18 YEARS OF AGE**

I am the parent or legal guardian of the participant named above and consent to their participation. I agree with all terms of this waiver on their behalf.

**Parent/Guardian Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_