



Waiver of Liability, Assumption of Risk and Indemnity Agreement

As a member of the HCA Integrative Health Advocacy Ltd., operating as and hereby further referred to as the Health Coach Alliance or HCA,

_____ understand that as a condition of membership I acknowledge that all offerings provided by the ORGANIZATION are Third Party and I HEREBY release the Health Coach Alliance and any companies legally tied to the above mentioned Association(s) from legal action resulting in bodily harm, injury, loss, liability, damage or cost including property damage. By becoming a member, confirm that I have read and agree to the Terms and Conditions of membership and the website.

I understand that the Health Coach Alliance and any companies legally tied to these associations cannot be held responsible for the actions of its members and that it is my responsibility to act / and advise within my level of education and experience. It is my

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duty to be aware of the laws associated with my profession in the province I do business.

I understand that, should I wish to sign up for liability insurance through the HCA group plan, that I must keep my membership active to remain eligible for this coverage. I understand that there is a cost to the liability insurance in addition to my membership fees.

I hereby release, waive, discharge and covenants not to sue OR COUNTERSUE the promoters, administration, organizations and any affiliated entities thereof from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM AGAINST OR DEMANDS THEREFORE ON ACCOUNT OF INJURY TO THE PERSON AND OR CLIENTS OF UNDERSIGNED OR PROPERTY OR RESULTING IN DEATH OF THE UNDERSIGNED OR CLIENTS OF THE ***UNDERSIGNED ARISING OUT OF OR RELATED TO EVENT(S) UNLESS CAUSED BY DIRECT NEGLIGENCE OF THE RELEASEES.***

I HEREBY AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releasees and each of them FROM ANY LOSS, LIABILITY, DAMAGE, OR COST INCLUDING BODILY INJURY OR PROPERTY DAMAGE, they may incur arising out of my presence or participation in the EVENT(S), UNLESS CAUSED BY DIRECT NEGLIGENCE OF THE RELEASEES.

I HEREBY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE arising out of or related to the EVENT(S) UNLESS CAUSED BY DIRECT NEGLIGENCE OF THE RELEASEES.

I HEREBY agree that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the Releasees, INCLUDING NEGLIGENT RESCUE OPERATIONS and is intended to be as broad and inclusive as is permitted by the laws of the Province or State in which the Event(s) is/are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Name: _____

Signature: _____

Date: _____