



Liability Waiver and Release

In consideration of the permission granted to me, my children, and/or my ward to engage in activities at the facility operated by K. Sports, Inc. located at 10103 Residency Road, Manassas, Virginia 20110 or such other place where K. Sports may operate (the "Facility"), I, the undersigned, individually and/or as parent/guardian, hereby acknowledge that the use of the Facility and the activities engaged therein involves risk of illness, injury, disability, death, or loss or damage to my person and my property and/or the person and property of my children or wards, and I assume full responsibility for all such risks to the maximum extent permitted by law. I further hereby release and covenant not to sue K. Sports, Inc., Pine Tree Enterprises, Inc., and Pine Tree Land, LLC (collectively, "K. Sports"), and all of K. Sports' agents, officers, directors, shareholders, members, managers, and employees, from any and all claims and liability for illness, injury, disability, death, or loss or damage to person or property and any consequences thereto and therefrom, and forever waive any claims that I may have against K. Sports, its agents, officers, directors, shareholders, and employees related to same to the maximum extent permitted by law. I further hereby agree to indemnify, defend, and hold harmless K. Sports and its agents, officers, directors, shareholders, members, managers, and employees, from all liability for illness, injury, disability, death, or loss or damage to person or property and any consequences thereto and therefrom caused in part by my use of the Facility and/or the use of my child/ward to the maximum extent permitted by law.

I, individually and/or as parent/guardian, have read this agreement and have been given sufficient time to review it and ask any questions I may have relating to it. I, individually or as parent/guardian, acknowledge that my execution hereof is material to the acceptance of my and/or my children's or ward's engagement in any activities at the Facility. I have freely and voluntarily agreed to sign this agreement. Furthermore, by signing below, I authorize any agent of K. Sports to act for me and/or my child/ward in securing medical treatment, and I release K. Sports and its agents, officers, directors, shareholders, members, managers, and employees of any liability therefrom. Notwithstanding anything to the contrary contained herein, nothing shall require K. Sports or its agents, officers, directors, shareholders, members, managers, and employees from securing such medical treatment. This release is governed by the laws of the Commonwealth of Virginia and shall inure to the benefit of K. Sports (as defined herein) and all of its agents, officers, directors, shareholders, members, managers, and employees thereof, and shall be binding on my heir, successors, and executors. I irrevocably agree to submit to the exclusive jurisdiction of the courts of Prince William County, Virginia for any claim involving K. Sports and/or its agents, officers, directors, shareholders, members, managers, and employees arising out of this agreement or any action that occurs at the Facility.

Print Participant's Name: _____

Signature: _____ Date: _____

Print Parent/Guardian's Name: _____

Signature: _____ Date: _____