gallupARTS Artist Lift Zone Liability Waiver

Safety and conditions of use
I agree that I am personally responsible for my safety and actions while using the Lift Zone. I agree to use the Lift Zone facilities, tools, equipment, and materials in a safe way. If I have any questions as to the proper or safe use of any tool, equipment, or material, I will not use the same until I have consulted with gallupARTS personnel. I will comply with all gallupARTS policies and rules, including but not limited to all Lift Zone policies, guidelines, signage, and instructions. Because the Lift Zone is open for use by other individuals, I recognize that confidentiality is not and cannot be promised. I understand that gallupARTS is not responsible for any lost, damaged, or stolen property.

Assumption of the risk
I recognize and agree that my use of the Lift Zone facilities, tools, equipment, and materials is entirely optional and voluntary. I further understand and agree that such use involves various inherent hazards, dangers, and risks, including without limitation, the risk of trips, slips and falls; cuts, and other wounds to body parts; and accidents due to negligence of other users or gallupARTS personnel or vendors, or due to defective or inadequate facilities or equipment. I ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, DAMAGE, OR PERSONAL INJURY, INCLUDING DEATH, THAT I MAY SUSTAIN, OR ANY LOSS OR DAMAGE OF PROPERTY I OWN, AS A RESULT OF BEING ENGAGED IN SUCH ACTIVITY, WHETHER CAUSED BY THE NEGLIGENCE OF THE CENTER OR OTHERWISE.

Release of liability
With full awareness and appreciation of the risks involved, I, for myself and on behalf of my family, spouse, estate, heirs, executors, administrators, assigns, and personal representatives, hereby forever release, waive, discharge, and covenant not to sue gallupARTS, its board members, officers, agents, servants, independent contractors, affiliates, employees, successors, and assigns (collectively the “Released Parties”) from any and all liability, claims, demands, actions, and causes of action whatsoever, directly or indirectly arising out of or related to any loss, damage, or injury, including death, that may be sustained by me or any of the property belonging to me, whether caused by the negligence of the Released Parties, any third-party using the Lift Zone, or otherwise, while participating in any activity while in, on, or around the Lift Zone and/or while using any Lift Zone facilities, tools, equipment, or materials.

Indemnification
I agree to indemnify, defend, and hold harmless the Released Parties from and against any and all costs, expenses, damages, claims, lawsuits, judgments, losses, and/or liabilities (including attorney fees) arising either directly or indirectly from or related to any and all claims made by or against any of the Released Parties due to bodily injury, death, property damage, loss of use, monetary loss, or any other injury from or related to my use of the Lift Zone facilities, tools, equipment, or materials, whether caused by the negligence of the Released Parties or otherwise.

Acknowledgment
By signing below I acknowledge and represent that I have read the foregoing Waiver of Liability, understand it and sign it voluntarily as my own free act and deed, including without limitation the Release of Liability and Indemnification requirements contained in Sections 3 and 4; I am sufficiently informed about the risks involved in using the Lift Zone to decide whether to sign this document; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this document for full, adequate, and complete consideration fully intending to be bound by the same. I agree that this Waiver of Liability shall be governed by and construed in accordance with Nevada law, and that if any of the provisions hereof are found to be unenforceable, the remainder shall be enforced as fully as possible and the unenforceable provision(s) shall be deemed modified to the limited extent required to permit enforcement of the Waiver of Liability as a whole.

_____________________________  ___________________________  ______________________
Name  Signature  Date