CONSENT, WAIVER AND RELEASE FROM LIABILITY

Note: Any participants under the age of 18 must have their parent or legally appointed guardian sign this waiver. The term “Releasor” as used herein shall mean the participant and, in the case of the participant being under the age of 18, the participant’s parent or legally appointed guardian.

1. This is a legally binding Release, Waiver, Discharge & Covenant Not To Sue (collectively, “Release”), made voluntarily by me, the undersigned Releasor, on my own behalf, and on behalf of my heirs, executors, administrators, legal representatives, and assigns (hereinafter collectively, “Releasor”, “I”, or “me”) to iBubble Soccer Ltd. and Richmond Sports and Fitness Ltd., and their related companies, directors, officers, shareholders, and employees.

2. As the undersigned Releasor, I fully recognize that there are dangers and risks to which I may be exposed by participating in the activities provided by iBubble Soccer Ltd. and Richmond Sports and Fitness Ltd.. As the undersigned Releasor, I understand that iBubble Soccer Ltd. and Richmond Sports and Fitness Ltd. does not require me to participate in these activities, at no designated time, but I want to do so despite the possible dangers and risks and despite this Release. The risk of injury from these activities is present, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist. I agree to assume and take on myself all the risks and responsibilities in any way arising from or associated with said activity, and I release iBubble Soccer Ltd. and Richmond Sports and Fitness Ltd. from any and all claims, demands, suits, judgments, costs, damages, actions, and liabilities of every name and nature whatsoever, whenever occurring, whether known or unknown, contingent or fixed, at law or in equity, that I may suffer at any time arising from or in connection with the participation in said activities, including any injury or harm to me, my death, or damage to my property (collectively, “Liabilities”), and I agree to defend, indemnify and hold iBubble Soccer Ltd. and Richmond Sports and Fitness Ltd. harmless from and against any and all Liabilities.

3. As the undersigned Releasor, I recognize that this Release means that I am giving up, among other things, all rights to sue for injuries, damages or losses I may incur. I also understand that this Release binds my heirs, executors, administrators, legal representatives and assigns, as well as me.

4. I agree that this Release shall be governed for all purposes by the law of the Province of British Columbia and the federal laws of Canada applicable therein.

5. As the undersigned Releasor, I recognize that I am subject to paying fully for the costs of damaged or stolen products. I am responsible for any damage or loss to all rented items and for returning these items in the same condition in which they were received.

6. I have read this Release in its entirety. I fully understand the entire Release and acknowledge that I have had the opportunity to review this Release with an attorney of my choosing if I so desire, and I agree to be legally bound by the Release.

By signing on the below signature box, I certify that I have received a copy of the iBubble Soccer Ltd. and Richmond Sports and Fitness Ltd. waiver and that I have fully read and understand and agree to the above iBubble Soccer Ltd. and Richmond Sports and Fitness waiver.

To be signed by Releasor and parent/guardian if athlete is under 18 years of age.

The Parent or legally appointed guardian who signs on behalf of the participants under the age of 18 (the “Minor”) hereby represents, warrants and covenants with and to iBubble Soccer Ltd. and Richmond Sports and Fitness Ltd. that he/she is the parent or legally appointed guardian of the participant, have all rights pursuant to applicable law to execute on behalf of the Minor and have fully read and understood and agree with the above iBubble Soccer Ltd. and Richmond Sports and Fitness Ltd. waiver.

Participant’s Full Name: ____________________________ Date: ____________________________

Participant’s Signature: ____________________________ Parent’s Signature: ____________________________