

ELEVATEHER

MENTORSHIP & EMPOWERMENT

LIABILITY WAIVER & RELEASE FORM

This Liability Waiver & Release ("Waiver") is entered into by the undersigned participant ("Participant") in connection with programs, workshops, healing circles, retreats, events, or virtual sessions ("Programs") offered by ElevateHer Mentorship & Empowerment LLC ("ElevateHer").

1. Voluntary Participation & Assumption of Risk

Participant voluntarily chooses to participate in ElevateHer Programs. Participant understands that Programs may involve emotional, physical (e.g., travel to retreats or events), or spiritual elements, and Participant knowingly and voluntarily assumes all risks associated with participation, known or unknown.

2. Release of Liability

To the fullest extent permitted by law, Participant releases, waives, discharges, and covenants not to sue ElevateHer Mentorship & Empowerment LLC, its founder, mentors, employees, volunteers, and agents (collectively, "Released Parties") from any and all liability, claims, demands, actions, or causes of action arising out of or related to any loss, damage, or injury, including death, that may be sustained by Participant while participating in any Program, or while on premises where a Program is being conducted.

3. No Guarantee of Outcomes

Participant understands that ElevateHer makes no guarantees regarding specific personal, emotional, financial, or professional outcomes as a result of participation in any Program.

4. Indemnification

Participant agrees to indemnify and hold harmless the Released Parties from any loss, liability, damage, or costs, including attorney's fees, that may arise from Participant's participation in any Program, to the extent permitted by law.

5. Medical/Emotional Considerations

Participant represents that they know of no medical, psychological, or emotional condition that would prevent safe participation in Programs, or Participant has disclosed any such condition to ElevateHer prior to signing this Waiver. Participant is encouraged to consult their own physician or licensed mental health professional as needed regarding fitness to participate.

6. Photo/Media Release (Optional)

Participant grants ElevateHer permission to photograph or record them during Programs and to use such images or recordings for marketing, social media, and promotional purposes, unless Participant opts out below.

- ☐ I DO consent to photo/media use as described above.

- ☐ I DO NOT consent to photo/media use. (Please notify staff at the start of any Program.)

7. Governing Law

This Waiver shall be governed by the laws of the State of Illinois. If any provision of this Waiver is held invalid, the remaining provisions shall continue in full force and effect.

8. Acknowledgment

I have read this Waiver, understand its terms, understand that I am giving up substantial legal rights by signing it, and sign it voluntarily.

Participant Signature

Printed Name

Date

If Participant is under 18, a parent or legal guardian must also sign below.

Parent/Guardian Signature (if applicable)

Printed Name

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