## Mobile Sauna &ICE bath Station Waiver Form Sauna Collective Ltd , Auckland, New Zealand

I, hereby acknowledge and agree to the terms and conditions:

outlined in this mobile sauna and Use Waiver Form ("Waiver"). I understand and accept the inherent risks associated with using the Sauna Collectives Mobile Sauna & Ice Bath Station, New Zealand. By signing this Waiver, I voluntarily assume these risks and release Sauna Collectives from any liability or claims that may arise during or as a result of my participation.

Assumption of Risk:

I understand and acknowledge the following:

- 1. Inherent Risks: The use of Sauna Collectives Mobile Sauna & ICE Bath Station may involve exposure to heat, steam, & cold, which in an unlikely event, can pose certain health risks, including but not limited to dehydration, overheating, cooling, and other physical discomforts.
- 2. Health and Fitness: I am responsible for evaluating my own health and fitness level before using the facilities. I affirm that I am in good health and have no medical conditions that would preclude me from safely using the sauna.
- 3. Supervision: I understand that Sauna Collective may provide general guidelines for sauna usage, but I am solely responsible for monitoring and regulating my own sauna experience.

Waiver and Release of Liability:

In consideration for being allowed to use the Sauna Collectives Mobile Sauna & ICE bath Station, I hereby release and discharge Sauna Collective, its employees, agents, and representatives, from any and all claims, demands, actions, or causes of action, whether in law or in equity, arising out of any injuries, damages, or losses that may occur as a result of my use of the facilities.

Indemnification:

I agree to indemnify and hold harmless Sauna Collective from all claims, demands, actions, or causes of action brought by third parties as a result of my use of the sauna facilities.

**Emergency Medical Care:** 

In the unlikely event of a medical emergency, I authorize Sauna Collective to seek medical treatment on my behalf and release them from any liability in doing so.

Photography and Media:

I grant Sauna Collectives the right to take photographs and videos of me while using their facilities and agree that they may use such media for promotional purposes without further consent or payment.

I have read and understand this Waiver and Release of Liability Form.

Participant's Full Name: Participant's Signature: Date:

If the participant is under 18 years old:

Parent/Guardian Consent (if applicable):

Parent/Guardian Full Name: Parent/Guardian Signature:

Date:

I, as the parent or legal guardian of the participant named above, hereby consent to their participation in the Sauna Collectives Mobile Sauna & ICE Bath Station activities and agree to all terms and conditions outlined in this Waiver and Release of Liability Form on their behalf.

Please retain a copy of this signed waiver for your records.