

**RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT
- Adult Waiver -**

I, _____, in consideration of the Hijama procedure ("**Hijama**") which I will undergo at the offices of Dr. Waheed Khan ("**Dr. Khan**"), hereby WARRANT AND AGREE:

1. I have been informed by Dr. Khan that there is no scientific evidence supporting the benefit of Hijama, and have been advised to pursue conventional medical procedures to treat my symptoms;
2. I have undergone an assessment by Dr. Khan and/or his staff to determine my general medical condition and fitness for Hijama;
3. I am familiar with and accept that there are risks to my health and wellbeing associated with undergoing Hijama, and in particular the risk of infection associated with wet cupping;
4. I have provided Dr. Khan and/or his staff with all of my relevant medical history information and have satisfied myself and believe that I am in sufficiently good health to undergo Hijama;
5. I understand that all applicable after-care recommendations must be followed; and
6. I will immediately inform Dr. Khan and/or his staff if at any time I feel that I have experienced any deterioration in my physical wellbeing during the Hijama procedure.

I UNDERSTAND AND AGREE, ON BEHALF OF MYSELF, MY HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND NEXT OF KIN THAT MY EXECUTION OF THIS DOCUMENT CONSTITUTES:

1. AN UNQUALIFIED ASSUMPTION BY ME OF ALL RISKS associated with my Hijama procedure even if arising from the negligence or gross negligence of the Releasees, as that term is defined below;
2. A FULL AND FINAL RELEASE AND WAIVER OF LIABILITY AND ALL CLAIMS that I have, or may in the future have, against Dr. Khan, his executors, administrators, heirs, successors, assigns, any related professional corporations, employees, agents, and representatives (collectively referred to as the "**Releasees**") from any and all liability for any loss, damage, injury or expense that I may suffer as a result of my Hijama procedure, due to any cause whatsoever, including negligence, gross negligence, breach of contract, or breach of any statutory or other duty of care;
3. AN AGREEMENT NOT TO SUE THE RELEASEES for any loss, injury, costs or damages of any form or type, howsoever caused or arising, and whether directly or indirectly from my participation in Hijama;
4. AN AGREEMENT TO INDEMNIFY, and to SAVE and HOLD HARMLESS the Releasees, and each of them, from any litigation expense, legal fees, liability, damage, award or cost, of any form or type whatsoever, they may incur due to any claim made against them or any one of them by me or on my behalf, or that of my estate, whether the claim is based on the negligence or the gross negligence of the Releasees or otherwise as stated above; and
5. AN AGREEMENT that this document be governed by the laws of the Province of Ontario.

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN SUBSTANTIAL LEGAL RIGHTS WHICH I AND MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE RELEASEES.

I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT.

Date (dd/mm/yyyy)

Signature of Participant

Printed Name of Participant

Signature of Witness