



## Participation Waiver and Guidelines Compliance Acceptance

### **WAIVER / RELEASE FOR INJURY AND COMMUNICABLE DISEASES INCLUDING COVID-19 ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT**

In consideration of being allowed to participate on behalf of Athletix and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes any possible injury and/or exposure to and illness from infectious diseases including, but not limited to, MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious injury, illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases, which includes all **Responsible Restart Ohio Guidelines**, and any other state or local health department guidelines. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the manager or nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Athletix, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY INJURY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

#### **FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)**

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against injury and communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

# Signatures for Participation Waiver and Guidelines Compliance Acceptance



Team Name:

Manager:

				For participants of minority age (under age of 18 at the time of registration)		
	(Please print last name, first name) Participant Name	Jersey #	(Only if participant is 18 years of age or older) Participant Signature	Name of Parent/Guardian	Parent/Guardian Signature	Signature Date
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
C1						
C2						
C3						
C4						
C5						

USE ROWS 1-13 FOR PLAYERS. USE ROWS C1-C5 FOR COACHES (or additional players).

**\*\* By signing this waiver, I acknowledge that I have been given a copy of the Athletix Participation Waiver and Guidelines Compliance, and have read, understand, and accept it's contents.**

**\*\*\* Managers or Team Administrators: Any adults over 18 who are coaching or in the dugout (including players 18 or older), must have passed a background check. In addition, at least one (1) of your coaches must be Safe Sport Trained, and at least one (1) of your coaches must have a valid Concussion Certificate, and a valid Sudden Cardiac Arrest Certificate. Both of which must be current within the last 2 years. By completing and turning in this waiver, you are acknowledging that your team is in compliance with all background checks and certifications as outlined above. You are also acknowledging that throughout the tournament event, your team and/or organization has current, up-to-date, and adequate insurance for both injury and/or incident liability.**