**CSI Waiver of Liability**

# Participants Name \*

First Name Last Name

# Parent/Guardian name if Athlete is under 18 years of age

First Name Last Name

# Email of 18 & over participant or parent/guardian \*

example@example.com

# Address \*

Street Address

Street Address Line 2

City State / Province

Postal / Zip Code

# Primary Number \* Secondary Number

Area Code Phone Number Area Code Phone Number

I, the undersigned participant(s)/parent, request voluntary participation for myself/minor(s) to participate in all events, which are hereinafter referred to as the “activities” sponsored by **CLUB NAME**.  I am aware of the risks associated with participation in these activities and hereby accept and assume full responsibility for any and all such risks.

I consent to my/minor’s participation in the activities and acknowledge that the minor(s) and I fully understand my/minor’s participation may involve risk of serious injury or death, including losses which may result not only from my/minor’s own actions, inactions or negligence, but also from the actions, inactions, or negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted, and/or the rules of play of this type of event or activity. I understand that if I have any risk concerns, I should discuss the risks associated with participation with the activity coordinators and event staff before I sign this document and before any activities begins.

I hereby authorize and consent to medical attention and treatment for myself or my child(ren) in the event of accident, injury, or illness. I will be financially responsible for any and all costs associated with any necessary medical attention and/or treatment.

# By typing my name, I am acknowledging and agree to the above Release \*

**Date \***

Month Day Year

Release – Minor’s Rights: In consideration of allowing Minor Participant(s) to participate in the activities, I hereby release and hold harmless **CLUB NAME** and its officers, employees, volunteers, other participants, and agents (collectively, and hereinafter, the “Released Parties”), of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that Minor Participant(s) may have or sustain with respect to any and all damage and/or injury, of any type, arising out of his or her participating in the activities. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

# By typing my name, I am acknowledging and agree to the above Release \*

**Date \***

 

Month Day Year

Release – Parents’/Guardians’ Rights: In consideration of allowing Minor Participant(s) to participate in these activities, I hereby release and hold harmless the Released Parties, of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that I may have or sustain with respect to any and all damage and/or injury, of any type, arising from Minor Participant’s participation in the activities. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

# By typing my name, I am acknowledging and agree to the above Release \*

**Date \***

 

Month Day Year

I certify that I am or my minor(s) is/are in good health and have no physical condition that would prevent participation in these activities. Furthermore, I agree to use my or my minor’s personal medical insurance as a primary medical coverage payment if accident or injury occurs. I consent to emergency medical treatment in the event such care is required.

# By typing my name, I am acknowledging and agree to the above Release \*

**Date \***

 

Month Day Year

Indemnification by 18 & over Participant or Parent/Guardian:

The undersigned 18 & over Participant or parent/guardian further agrees to indemnify, save and hold harmless the Released Parties from any and all claims, demands, losses, damages and liabilities for indemnities, contribution or otherwise with respect to any damage and/or injury, of any type, arising from my or Minor Participant’s participation in the activities. The undersigned also agrees that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the Releasee and is intended to be as broad and inclusive as is permitted by the laws of the State in which the Event(s) is/are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

# By typing my name, I am acknowledging and agree to the above Release \*

**Date \***

 

Month Day Year

Hold Harmless Waiver/COVID- 19:

As participants in these activities, we are agreeable to the following:

We acknowledge that we are aware that there are risks of exposure to, directly or indirectly arising out of, contributed to, by, or resulting from:

* An outbreak of any and all communicable disease, including but not limited to, the virus “severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)”, which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof.

In consideration of having the opportunity to participate in these activities at this location, and in acknowledging that we are aware of and willing to assume the risks associated with this activity, We hereby voluntarily agree to waive, hold harmless and indemnify the Released Parties from any and all claims, demands, damages and causes of action of any nature whatsoever, including those arising out of ordinary negligence which we, our heirs, our assigns or successors may have against them for, on account of, or by reason of our participation in the above activities. We indicate our agreement to this hold harmless elective as noted below.

# By typing my name, I am acknowledging and agree to the above Release \*

**Date \***

 

Month Day Year