



RELEASE OF LIABILITY AGREEMENT

AGE AS OF 7/31

Print Participant/Athlete Full Name:		Age:	Date of Birth:
Address (Street Address, City & Zip Code)			
Print Legal Parent/Guardian Name:		Cell Number:	
Parent Email Address:			



For and in consideration of the undersigned Parent/Guardian with (Chapter Name): SOUTH GATE AZTECS of SCEYFL-AAU and its event and being allowed to participate in event/s and member activities, participant waive, release and relinquish any and all claims for liability and cause(s) of action, including for personal injury, property damage or wrongful death occurring to participant arising out of participation in events, or sports, and/or activities incidental thereto, whenever or however they occur and for such period said activities may continue, and by this agreement any such claims, rights, and causes of action that participant may have are hereby waived, released and relinquished, and participant do so on behalf of their heirs, executors, administrators and assigns.

Participant acknowledge, understand and assume all risks relating to events or sports participation and activities incidental thereto, and understand that activities incidental thereto involve risks to participant's person including bodily injury, potential COVID-19 exposure, partial or total disability, paralysis and death, and damages which may arise there from and that we have full knowledge of said risks. These risks and dangers may be caused by the negligence of the participant, or the negligence of others, including the organization, its affiliates, members, event hosts, other participants, other parents and legal guardians, coaches, officials, sponsors, advertisers, owners and operators of the premises used to conduct any event and each of them, their officers, directors, agents and employees (collectively, "releasees"), and include risks arising from the conditions and use of facilities and related premises. I/We further acknowledge that there may be risks and dangers not known to us or not reasonably foreseeable at this time.

Participant acknowledge, understand and assume the risks, if any, arising from the conditions and use of facilities and related premises, whether as a participant or a spectator, including without limitation, the risks involved with participating in the Organization's activities. Participant further acknowledge and understand that included within the scope of this waiver and release is any cause of action (including any cause of action based on negligence) arising from the performance, or failure to perform, maintenance, inspection, supervision or control of said areas and for the failure to warn of dangerous conditions existing at said facilities, for negligent selection of certain releasees, or negligent supervision or instruction by releasees.

Participant acknowledge, understand The Organization reserves the right to photograph facilities, activities and program participants for potential future use. All photos remain the property of the Organization and may be used for publicity and promotional services.

Participant agree if any claim for personal injury or wrongful death is commenced against releasees, he/she shall defend, indemnify and save harmless from any and all claims or causes of action by whomever or wherever made or presented for his/her personal injuries, property damage or wrongful death.

Participant acknowledge that they have been provided and have read the above paragraphs and have not relied upon any representations of releasees, that they are fully advised of the potential dangers and risks and understand these waivers and releases are necessary to allow the activities of the Organization to exist in its present form.

I voluntarily agree to assume the foregoing risks and accept sole responsibility for any injury to my child/children or myself, or any friend/relative that I may bring to said event/s (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child/children, or any friend/relative that I may bring to said event/s, may incur by reason of this activity ("Claims"). On my behalf, and on behalf of my child/children, or any friend/relative, I hereby release and covenant not to sue Chapter Name: SOUTH GATE AZTECS of SCEYFL-AAU its affiliated organizations, employees, volunteers, agents, and representatives, of and from the Claims.

Parent/Guardian Signature:	Date Signed:
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