



Tryouts 2018-19

Age Division

ATHLETE PROFILE

Player _____ Grade _____ Age _____ DOB _____ School _____

Mother _____ Father _____ Contact Email _____

Address _____ City _____ Zip _____

Mother's Cell (____) _____ Father's Cell (____) _____ Player's Cell (____) _____

Facebook _____ Twitter _____ Instagram _____ Snap Chat _____

Played Club? Yes No What club? 2018 _____ 2017 _____ 2016 _____

Were you referred to So-Cal Juniors? By Who? _____

WAIVER OF LIABILITY AND MEDICAL RELEASE

_____, My Daughter/Son, here-in listed as player, is hereby given my consent to participate in organized tryouts, practices, clinics/camps, lessons, tournaments, travel events competition and/or gym use with So-Cal Juniors Volleyball Club, Inc.

For good consideration, the undersigned does hereby waiver, release, acquit, and forever discharge So-Cal Juniors Volleyball Club, Inc., its officers, Directors, collectively and individually, coaches, other club members, players participating with the club, volunteer parents assisting with club activities, and any and all persons directly and indirectly associated with So-Cal Juniors Volleyball Club, Inc., and each of them from any and all acts, causes of action, claims, demands, cost of expenses on account of or which shall in some way develop out of any and all known and unknown personal injuries and property damages which the player/participant may suffer during the course of or as a result of the participation in any club activities including, but not limited to, tryouts, practices, tournaments, clinics, lessons and travel to and from club events.

I, as a parent or guardian of player also give my permission for this player to receive minor medication when the need may arise. This will be given by the trainer or other adult in charge at the time. In case of emergency or in the event I cannot be reached, I authorize emergency treatment for my child at the nearest recognized medical facility.

I, as a parent or guardian of player also request that my child be permitted to travel with So-Cal Juniors Volleyball Club, Inc. Should any illness or accident affect my child, I will not hold So-Cal Juniors Volleyball Club, Inc., its owners, officers, directors, coaches, or parent drivers responsible or liable for medical or expenses in the care of my child. This authorization is given pursuant to Section 25.8 of the Civil Code of California.

In consideration of being allowed to participate in any way with the So-Cal Juniors Volleyball Club, Inc., Clinics, Camps, Skills Sessions, private lessons, tryouts, practices, tournaments, related events and activities, I, the undersigned, acknowledge, appreciate and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment and personal discipline may reduce the risk, the risk of serious injury 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 the player participation; and
3. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS So-Cal Juniors Volleyball Club, Inc., and their officers, officials, agents and/or employees, coach's, other participants, sponsoring agencies, sponsors, and advertisers and if applicable, owners of premises used for the activity ("Releaseses"), WITH RESPECT TO ANY AND ALL INJURY, DIABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE 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.

This is to certify that I, as parent/Guardian with the legal responsibility for this participant, do consent and agree to his/her release as provided above of all the releases, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releases from ANY and ALL liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Parent/Guardian Printed Name

Parent/Guardian Signature

Date

So-Cal Juniors Volleyball Club, Inc. 11651 Markon Drive, Cypress, CA 92841

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