

## YOUTH SOCCER

### COVID 19 WAIVER AND RELEASE AGREEMENT

***This is an important document and a release of certain legal rights.***

As a result of the worldwide Covid-19 Pandemic, there are new and substantial risks to participating in youth soccer. In consideration of my participation in soccer practice and games with WCFC-SCP, INC., I agree as follows:

RISKS. I am aware that participating on a youth soccer team creates the risk of becoming infected with and transmitting Covid-19. The risk comes from being in proximity and contact with players and coaches in practice and games as well as facilities and travel. While WCFC-SCP can make rules and procedures to attempt to limit the risk, minors will not always follow all directions completely, which increases risk to others. I understand that the danger can be reduced by taking certain precautions and following appropriate protocols, but that the risk can not be eliminated. The danger is increased by the fact that the illness is new and medical and public health officials are still learning about the illness.

REPRESENTATIONS. I am aware that I will be asked about my physical health and symptoms as well as any exposure to people who are sick and travel. I am aware that my honest and accurate responses are critical to mitigating risk and represent that all of my answers will be true and accurate.

WAIVER AND RELEASE. For myself, my heirs, successors, and executors, I hereby KNOWINGLY AND INTENTIONALLY WAIVE all Claims that I have or may have in the future because of my participation in the youth soccer program run by WCFC-SCP, INC. Further, I hereby KNOWINGLY AND INTENTIONALLY AND COMPLETELY RELEASE WCFC-SCP, INC., their directors, officers, agents, employees, volunteers, and affiliates from and against any and all claims, actions, causes of action, liabilities, suits, expenses, which are related to, arise out of, or are in any way connected with my playing youth soccer with WCFC-SCP and participation in related activities, including, but not limited to, any claim relating to Covid-19 or negligence of any kind or nature, whether predictable or unforeseen, resulting directly or indirectly in any damage, loss, injury, paralysis, or death to me or my property as a result of my engaging in these activities.

I HAVE CAREFULLY READ, CLEARLY UNDERSTAND, AND VOLUNTARILY SIGN THIS WAIVER AND RELEASE AGREEMENT.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Address \_\_\_\_\_

If Participant is a Minor:

If under eighteen years of age, parent, guardian, or custodian must sign below.

In consideration for the above minor being permitted to participate in youth soccer activities with WCFC-SCP, I certify that I have the authority to act for the minor and I agree to the above waiver, and release set forth in this document on behalf of the minor.

Print Name of Minor: \_\_\_\_\_

Signature of Parent, Guardian or Custodian of Minor: \_\_\_\_\_

Relationship to Minor: \_\_\_\_\_