

RELEASE AND WAIVER

Port St. Lucie National Little League, Inc. and its Board of Directors (collectively “PSLNLL”) have established preventative measures and policies to reduce the risk of the spread of Coronavirus/COVID-19 (“COVID-19”). PSLNLL, cannot, however, guarantee that you, your child(ren) and/or family, will not become exposed and/or infected with COVID-19. This Waiver and Release of Liability Relating to COVID-19 (“Waiver and Release”) is effective from September 1, 2020 through September 1, 2021 of the PSLNLL baseball season and encompasses any and all PSLNLL events and activities (collectively “PSLNLL activities”).

I, _____, of _____, the
(Name) *(Address)*
parent guardian of _____, a minor child, hereby,
(check one) *(Name)*

- Acknowledge that I have read each paragraph of the Waiver and Release;
- Acknowledge that I had the opportunity, before signing the Waiver and Release, to ask questions about, discuss, and negotiate any of the terms set forth in the Waiver and Release;
- Acknowledge and understand that I am agreeing to the terms set forth in the Waiver and Release, as consideration for my child(ren) being permitted to participate in PSLNLL activities;
- Acknowledge and understand the contagious nature of COVID-19, and I voluntarily assume the risk that my child(ren), my family and/or I, may be exposed to and/or infected by COVID-19 by participating in PSLNLL activities, and that such exposure or infection may result in personal injury, illness, disability, or death; and
- Acknowledge and understand that the risk of becoming exposed to or infected by COVID-19 while participating in PSLNLL activities may result from the actions, omissions, or negligence of myself and others, including, but not limited to, PSLNLL employees, volunteers, and all of PSLNLL’s program participants and their families. I acknowledge and understand that it is impossible to eliminate the risk that my child(ren), and my family, may become exposed to and infected by COVID-19 when participating in PSLNLL activities.

I, for myself, my child(ren), my heirs, personal representatives or assigns, voluntarily agree to assume the risk that my child(ren), and my family, may be exposed to, and become infected by, COVID-19, when participating in PSLNLL activities, and I agree to accept responsibility for any illness or injury that my child(ren), or my family, may experience in connection with PSLNLL activities, including, but not limited to, personal injury, disability, illness, and death. I voluntarily agree to release, waive, and discharge PSLNLL and its officers, directors, agents, volunteers, coaches, and insurers (the “Released Parties”) from and against any and all liability, claims, demands, actions, damages, or causes of action of any kind arising from or related to my child(ren), my family, or I being exposed to or infected by COVID-19 when participating in PSLNLL activities.

The Waiver and Release includes claims premised on the negligence of the Released Parties. In the event of any dispute arising under or related to the Waiver and Release, the laws of the State of Florida shall apply.

I UNDERSTAND THAT BY EXECUTING AND ACKNOWLEDGING THIS WAIVER AND RELEASE, I AM RELEASING CLAIMS WHICH I MAY OTHERWISE HAVE BEEN ABLE TO PURSUE, AND AM GIVING UP SUBSTANTIAL RIGHTS.

By: _____
(Signature)

Date: _____