



RITENOUR HUSKIES' JR FOOTBALL / HURRICANES FOOTBALL

WAIVER AND RELEASE FORM

In consideration of the risk of injury while participating in the activity of football with Ritenour Huskies Jr Football and/or Hurricanes Football, (Activity) and as consideration for the right to participate in the Activity. I, _____ as parent or guardian, allow my child _____ and grant permission for my child to participate.

As a condition of said permission, I, myself, my heirs, executors, administrator, assigns, personal representative, hereafter, (I), knowingly and voluntarily enter into this waiver and release of liability and hereby waive all rights, claims and causes of actions of any kind whatsoever arising out of my child's participation in this Activity and hereby release and forever discharge the Ritenour Huskies Jr Football, Hurricanes Football, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, successors and assigns of liability for any physical or psychological injury including but not limited to illness, paralysis, death, damages, economical or emotional loss that may result in participation of any kind in the aforementioned activity or to and from any event related to the Activity.

I agree to indemnify and hold harmless against any and all claims, suits and all actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me, or anyone on my behalf including attorney fees any related costs of litigation arising pursuant to any claims made by me or any one acting on my behalf of any kind and I agree to incur any and all cost associated with litigation arising out of all claims or causes of actions filed or brought.

I acknowledge that all agents, directors, officers, volunteers, representatives, agents are not responsible for errors, omissions, acts or failure to act of any party or entity conducting specific events or activities not related to the Ritenour Huskies Jr Football or Hurricanes Football.

I acknowledge this Activity may involve a test of a person's physical or mental limits and may cause potential for harm or death, serious injury, or property loss. The risk may include, but not limited to those caused by terrain, facilities, temperature, weather, and lack of hydration, conditions of participants, equipment, vehicular traffic, and actions others, but not limited to participants, volunteers, spectators, coaches, event officials and producers of the event Activity.

I acknowledge that I have carefully read this "Waiver and Release" and fully understand this release of liability. I agree to release and discharge the Ritenour Huskies Jr Football, HURRICANES football, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, successors and assigns from any and all claims or causes of action and I agree to voluntarily give up or waive and rights that I otherwise have to bring legal actions against for personal injury or damage to self or property.

In the event I or my child require medical attention, care or treatment, I will be full and wholly financially responsible for any cost associated. I will not hold the United Football League, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, successors and assigns financially responsible for medical care and treatment. In the event I cause damage to any equipment, or facility as a result of my, my family or friend's negligence, recklessness or carelessness I agree to be held financially liable for all cost associated.

I am voluntarily participating in the aforementioned Activity and I am participating in the Activity entirely at my own risk. I am aware if the risk associated with participating in this Activity which may include injury, pain, suffering, illness, disfigurement, whether permanent or temporary including possible paralysis, economic or emotional loss and death. I understand these injuries or outcomes may arise from my own or other's negligence, traveling to and from or any condition associated with this Activity. Knowing the potential for risk, both known and unknown as a result of participating in this Activity, I assume said risks.

Signature (Print and sign) _____

Date _____