



## WAIVER AND RELEASE OF LIABILITY

IN CONSIDERATION OF the risk of injury that exists while participating in soccer/futsal practices and games (hereinafter the "Activity"); and

IN CONSIDERATION OF my desire to participate in said Activity and being given the right to participate in the same;

I HEREBY, for myself, my heirs, my executors, administrators, assigns, predecessors, successors or personal representatives (hereinafter collectively "Releasor", "I" or "me" which terms shall also include Releasor's parents or guardians if Releasor is under 18 years of age), knowingly and voluntarily enter into this WAIVER AND RELEASE OF LIABILITY and hereby waive any and all rights claims or causes of action of any kind arising out of my participation in the Activity; and

I HEREBY release and forever discharge Rhode Island Futsal Association and Rhode Island Futsal Club, their affiliates, board members, directors, managers, staff, attorneys, agents, volunteers, executors, administrators, predecessors, successors, assigns, or representatives (hereinafter collectively "Releasees") from any injuries or outcome(s) that may suffer as a direct result of my participation in the aforementioned Activity.

I HEREBY AFFIRM THAT I am voluntarily and at my own risk participating in the aforementioned Activity and I am aware of the risks associated with participating. Which may included but are not limited to injury, pain, suffering, illness, disfigurement, temporary or permanent disability, (including paralysis) economic or emotional loss, and death. I understand that these injuries our outcome(s) may arise from my own or other's negligence, conditions related to travel to and from the Activity or from condition(s) at any of the locations where the Activity takes place. Nonetheless, I assume all related risks, both known and unknown to me, of my participation in this activity.

I FURTHER AGREE to indemnify, defend and hold harmless the Releasees against any and all claims, suits or actions, of any kind whatsoever for liability, damages, compensation, or otherwise brought by me or anyone on my behalf, including attorney's fees and any related costs. I further acknowledge that the Releasees are not responsible for errors, omissions, acts or failures to act of any party or entity conducting a specific event or activity on behalf of the Releasee. In the event that I should require any medical care or treatment, I authorize the Releasees to provide all the emergency medical care deemed necessary. I further agree to be financially responsible for al costs incurred as a result of such treatment. I also agree that should carry my own heath insurance.

In the event that any damage to equipment or facilities occurs as a result of my or my family's willful actions, neglect, negligence, or recklessness, I agree to be financially responsible for al costs incurred as a result of such actions.

This WAIVER AND RELEASE OF LIABILITY supersedes any and all previous oral or written promises or agreements and shall remain in effect for the duration of the Releasor's participation in the Activity, during this initial and all subsequent events or participations. In the event that any provision contained within this WAIVER AND RELEASE OF LIABILITY shall be deemed severable, invalid, unenforceable or unlawful the remainder of this agreement shall remain in full effect.

I HEREBY acknowledge that I have carefully read and understand all the above statements. I agree that this releases

Activity's participant name: \_\_\_\_\_

Parent Guardian name: \_\_\_\_\_

Relationship to minor: \_\_\_\_\_

Activity's participant/parent/guardian signature: \_\_\_\_\_

Date: \_\_\_\_\_