Lakewood Ranch FC 955 53rd St E – Suite 823 Bradenton FL 34208

The undersigned, in my capacity as parent or legal guardian, hereby acknowledge the health risks and dangers associated with the transmission of the COVID-19 virus, and other communicable diseases, and recognize that exposure to the COVID-19 virus, or other communicable diseases, could occur while my child(ren) is in the care of Lakewood Ranch FC, "the Club".

COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact. COVID-19 can lead to severe illness, permanent disability, and/or death. Federal, State, and Local authorities recommend social distancing as a means to help prevent the spread of the virus. I have read, fully understand, and agree, for both myself and my minor child(ren), to abide by the Club's Return to Play Guidelines to respect these same Federal, State, and Local recommendations. Participating in group activities could increase the risk of contracting COVID-19. Lakewood Ranch FC in no way warrants that COVID-19 infection will not occur through participation in the Club.

As such, and in consideration for services to be provided by Lakewood Ranch FC, the undersigned, for myself and my minor child(ren), fully assume all of the risks associated with participation, including the possibility of COVID-19 (or the novel coronavirus) community spread.

I, AS PARENT AND/OR LEGAL GUARDIAN, HAVE READ AND FULLY UNDERSTAND AND ACKNOWLEDGE THE CONTENTS OF THE RELEASE AND AGREE THAT I AM VOLUNTARILY WAIVING, RELEASING, INDEMNIFYING AND DISCHARGING LAKEWOOD RANCH FC AND ITS OFFICERS, DIRECTORS, EMPLOYEES AND VOLUNTEERS FROM ANY AND ALL LIABILITY, DAMAGES, AND EACH AND EVERY ACTION (COLLECTIVELY, "CLAIMS") BY PARTICIPATION IN AND/OR ASSOCIATED WITH THE CLUB INCLUDING, BUT NOT LIMITED TO EXPOSURE OR TRANSMISSION OF THE COVID-19 VIRUS.

I represent that I have full authority to sign on behalf of my child(ren) and that my signature binds each other person having authority to make decisions on behalf of the child(ren).

MY SIGNATURE BELOW IS CONFIRMATION THAT I HAVE READ AND FULLY UNDERSTAND AND ACKNOWLEDGE THE CONTENTS OF THE RELEASE AND AGREE THAT I AM VOLUNTARILY WAIVING, RELEASING, INDEMNIFYING AND DISCHARGING LAKEWOOD RANCH FC AND ITS OFFICERS, DIRECTORS, EMPLOYEES AND VOLUNTEERS FROM ANY CLAIMS.

Parent Name	Parent Signature	Date
Child(ren) Names:		