



UNITED SPORTS

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY AND PARENTAL CONSENT AGREEMENT

I hereby release and discharge United Sports Training Center ("USTC"), its agents, employees, staff members, directors, and officers from any claims, responsibilities or liabilities for injuries or harm incurred as a result of my participation and/or my child's participation as a player or spectator in programs and activities, including rock wall activities at United Sports Training Center.

Field Hockey Tournaments

- Winter
- Spring
- Summer
- Fall

Field Hockey Leagues

- Winter
- Spring
- Summer
- Fall

Home of United Field Hockey Club

Open Play

Eastern Field Hockey Camp

1. I fully understand: (a) these activities involve risks and dangers of serious bodily injury, ("RISKS"); (b) these risks and dangers may be caused by my own actions or inactions; the actions or inactions of others participating in the Activity; the condition in which the activity takes place; or the negligence of the "RELEASEES" named below; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

2. I authorize USTC, its agents, employees, staff members, directors and officers to take whatever action is necessary, in their best judgment, in an emergency and I hereby release and discharge USTC, its agents, employees, staff members, directors and officers from any responsibility or liability related thereto. I hereby grant USTC permission to use my and/or my child's name, picture or likeness in any printed media or any form of advertisement. I fully renounce any and all claims upon USTC for reimbursement for use of this material.

TEAM: _____

Division: **U12** **U14** **U16** **U19**
(circle one)

Participant: _____ DOB: _____ Age: _____

Home/Cell Phone: _____ email: _____

Address: _____

City/State: _____ Zip _____

Signature: _____

Participant over 18 yrs of age or Legal Parent/Guardian

ALL WAIVERS MUST BE SUBMITTED BEFORE TOURNAMENT PLAY