



**HELOTES YOUTH SOCCER ASSOCIATION (HYSA) WAIVER
WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19
ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT**

In consideration of being allowed to participate on behalf of **Helotes Youth Soccer Association (HYSA)** and its affiliated activities and events, the undersigned acknowledges, appreciates, and agrees that:

Participation may expose individuals to infectious diseases, including but not limited to MRSA, influenza, and COVID-19. While guidelines and individual responsibility may reduce this risk, the possibility of serious illness or death remains.

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES** or others, and accept full responsibility for my participation.

I agree to comply with all rules, policies, and directions regarding protection from infectious diseases. If I observe an unusual or significant hazard, I will immediately remove myself from participation and alert the nearest HYSA official.

I, on behalf of myself, my heirs, assigns, personal representatives, and next of kin, **RELEASE AND HOLD HARMLESS HYSA**, its officers, officials, agents, volunteers, employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct HYSA events ("RELEASEES"), **WITH RESPECT TO ANY ILLNESS, DISABILITY, DEATH, or damage to person or property**, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

By registering or participating, **YOU AGREE** that you have read this waiver and assumption of risk, understand its contents, and freely agree without coercion or inducement.

FOR PARTICIPANTS UNDER AGE 18

As the parent/legal guardian of the participant, I have reviewed and explained this waiver to my child/ward, including the risks involved. My child/ward understands and accepts these risks. I, for myself, my spouse, and my child/ward, consent to this waiver and further agree to **INDEMNIFY AND HOLD HARMLESS HYSA** and all RELEASEES for any incident related to my child's participation, EVEN IF ARISING FROM NEGLIGENCE.

RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND INDEMNITY AGREEMENT

In consideration of being permitted to participate in HYSA activities, I hereby:

- **Release and hold harmless** HYSA, its board, directors, agents, volunteers, and staff from any and all claims related to injury, disability, death, or property damage.
 - Acknowledge that by signing this agreement, I give up substantial legal rights.
 - Agree not to rely on any oral representations made by HYSA representatives outside of this document.
 - Understand this waiver applies to all future HYSA-related events, activities, and venues.
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CONSENT FOR EMERGENCY MEDICAL TREATMENT

In the event of a medical emergency, I authorize **Helotes Youth Soccer Association (HYSA)** representatives to secure emergency medical care on behalf of the participant. I acknowledge that HYSA and its representatives assume no liability for the outcomes of such care.

PHOTOGRAPHY/VIDEOGRAPHY CONSENT

HYSA reserves the right to use photos or video taken during HYSA events without the expressed written consent of those pictured. Media may be used in HYSA communications, marketing, promotions, or digital platforms (including but not limited to websites, social media, and newsletters).

NO REFUND POLICY

I understand that HYSA maintains a **No Refund Policy** for registrations and participation fees.

WEATHER POLICY

I understand HYSA cannot control weather-related cancellations. Make-up games are not guaranteed and no refunds or credits will be issued due to cancellations caused by weather.

EXPRESS ASSUMPTION OF RISK FOR SPORTS, VENUES, AND RELATED ACTIVITIES

I acknowledge and accept the inherent risks associated with soccer and athletic participation, including:

- Potential for serious injuries including concussions, broken bones, permanent disability, and death.
- Equipment failure or misuse.
- Risks associated with the playing surface or surrounding environment.
- Risks related to heatstroke, dehydration, sunburn, frostbite, and hypothermia.
- Remote injury where medical support may be delayed.
- Collision or contact with other players, officials, vehicles, or equipment.
- My own physical condition, fatigue, or inattention.

I UNDERSTAND THIS IS NOT A COMPLETE LIST OF RISKS, and that unanticipated injuries or complications may occur. I accept these risks knowingly and voluntarily.

By registering with HYSA, I acknowledge that I have read, understood, and agreed to all the terms outlined in this waiver.
