Eagles/Knights Soccer/Multi-Sports Camp Waiver Form 2025

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The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

The Eagles/Knights Soccer/Sports Camp has put in place preventative measures to reduce the spread of COVID-19; however, the Eagles/Knights Soccer/Sports Camp cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending Eagles/Knights Soccer/Sports Camps could increase your risk and your child(ren)'s risk of contracting COVID-19.

By accepting this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending Eagles/Knights Soccer/Sports Camps and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at an Eagles/Knights Soccer/Sports Camp may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Eagles/Knights Soccer/Sports Camp employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at the Camp or participation in Camp programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless Eagles/Knights Soccer/Sports Camps, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto.

I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Camp, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Camp program. I/we have read this assumption of the risk and waiver of liability relating to coronavirus/covid-19, fully understand its terms, understand that I/we have given up substantial rights by agreeing to it and agree to it freely and voluntarily without any inducement.

i give my child/ward		
will be supervised and the Denville Township, Morris is a physical activity and various injuries may occur. of participating in this program and a physical exam I verify that the above stated address is the permane is, to the best of my knowledge, true and correct. As	nt residence of the above named registered and that all the information stated intentional falsifying of information will result in automatic expulsion of modes. I agree to abide by all rules, regulations, and policies as set forth by the I	his progran ly capable ited above ny
Signature of Parent / Guardian	Date	
Print Name of Parent / Guardian	Name(s) of Camper Participant(s)	
Email	 Phone	