

RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

PLEASE READ BEFORE SIGNING

IN CONSIDERATION OF the child/adult named below being allowed to participate in activities and related events in the PORT ARANSAS YOUTH SOCCER LEAGUE (PAYSL) PROGRAM, the undersigned acknowledges, understands, and agrees to the following:

- 1. The risk of injury and/or illness from activities involved in youth soccer is significant, including the potential for permanent paralysis and death; while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist.
- 2. The risk to have direct or indirect contact with individuals who have been exposed to or diagnosed with a communicable disease, including but not limited to COVID-19) or other medical conditions, diseases, maladies, or variations thereof, does exist and it is impossible to eliminate the risk that this child and associated family members attending program activities could become infected through contact with or close proximity to an individual with a communicable disease.
- 3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, and assume full responsibility for this child's participation in youth soccer.
- 4. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual, significant hazard during my presence at activities and/or events sponsored by PAYSL, this child/adult will discontinue participation and bring such hazard to the attention of the nearest official immediately.
- 5. This child/adult, and on behalf of my/our heirs, assigns, personal representatives, and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS Port Aransas Youth Soccer League, as well as their respective officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (RELEASEES), from any and all claims, demands, losses, and liability arising out of or related to any ILLNESS, INJURY, DISABILITY, DEATH, or loss or damage to person or property, to this child/adult, suffer, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Participant Name: _____ Date of Birth: ____

Participant Signature:	Date Signed:
FOR PARENTS OR GUARDIANS OF PARTICI	PANT OF MINORITY AGE YOUTH PARTICIPANTS
release as provided above of all the Releasees, indemnify and hold harmless the Releasees from	egal responsibility for this participant, do consent and agree to his/her and, for myself, my heirs, assigns, and next of kin, I release and agree to n any and all liability incidents to my minor child's involvement or ve, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES
Parent/Guardian Name:	Date Signed:
Parent/Guardian Signature:	