**WAIVER AND RELEASE OF LIABILITY**

**DISCLAIMER: B. Scott Basketball Academy, LLC its coaches, employees, representatives, agents, vendors, and independent contractors, shall not be responsible for any injury to any person or loss of any property which occurs as a result of participation in any basketball tryouts, camps, clinics, practices, tournaments or other programs, run, sponsored or supported by B. Scott Basketball Academy, LLC.**

This Consent and Waiver of All Claims concerns the participation of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in any and all athletic activities associated with B. Scott Basketball Academy, LLC.

Athletic Activities by their very nature involve the risk of personal injury and serious hard including death as well as potential exposure to and illness from infectious and/or communicable diseases, including but not limited to COVID-19, MRSA, influenza, and other infectious and/or communicable diseases, and other risks that are not known or not reasonable foreseeable.

The undersigned, on my own behalf and on behalf of my minor children or wards, hereby releases and holds B. Scott Basketball Academy, LLC harmless for any or all claims for personal injury, wrongful death or property loss or damage arising out of, in connection with, participation in B. Scott Basketball Academy, LLC activities, its equipment and facilities and any activities incidental thereto, wherever, whenever, or however the same may occur. I hereby voluntarily waive any and all claims that may be made by me, my family, estate, heirs, or assigns.

I am aware of the risks to persons and property posed by engagement in the B. Scott Basketball Academy, LLC activities. I am voluntarily participating with knowledge of the risks involved in the B. Scott Basketball Academy, LLC activities and I hereby agree to accept any and all inherent risks of personal injury, death or property damage or loss. I understand that this waiver is intended to be as broad and as inclusive as permitted by the laws of the State of Ohio, and agree that if any portion is held invalid, the remainder of the waiver and release will continue in full force and affect. I affirm that I am of legal age and freely sign this agreement on my behalf and on the behalf of my minor children or wards.

I authorize B. Scott Basketball Academy, LLC to act on my behalf in the event of an emergency and agree to hold B. Scott Basketball Academy, LLC harmless for any actions deemed necessary by B. Scott Basketball Academy, LLC and taken in the event of an emergency.

**I have read this form and fully understand that by signing this form, I am giving up all legal rights and/or remedies which may be available to me for personal injury, wrongful death or property damage or loss arising out of, or in connection with, my (or my minor children’s or ward’s) participation in B. Scott Basketball Academy, LLC Activities.**

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Print Participate Name Print Parent/Guardian Name

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Date Date