



Waiver of Liability and Assumption of Risk Agreement

Participant's Name: _____

Parent/Guardian's Name (if participant is under 18): _____

Address: _____

City, Postcode: _____

Contact Number: _____

Email Address: _____

1. Agreement to Participate

By signing this document, I, the undersigned, acknowledge that I am voluntarily enrolling myself/my child in soccer training and activities provided by ZSports. I understand that participation in these activities involves inherent risks and dangers that could result in physical injury or illness, including, but not limited to, injuries caused by falls, contact with other participants, and equipment-related mishaps.

2. Assumption of Risk

I acknowledge and agree that:

- Soccer involves physical contact and exertion, which carries a risk of serious injury, including bruises, sprains, fractures, concussions, and other trauma.
- Participation may involve environmental risks such as adverse weather conditions, terrain irregularities, and other natural hazards.
- There is a possibility of exposure to contagious diseases, including but not limited to COVID-19.

I voluntarily assume all risks associated with my/my child's participation in these activities.

3. Waiver of Liability

To the fullest extent permitted by law, I, for myself and on behalf of my child (if applicable), my heirs, executors, administrators, and assigns, hereby waive, release, and discharge ZSports, its directors, officers, employees, coaches, volunteers, agents, and

representatives from any and all liability, claims, demands, or causes of action for injuries, illnesses, damages, or losses that I or my child may incur or sustain during or in connection with participation in the activities, regardless of whether such injury, illness, or damage is caused by the negligence of ZSPORTS or otherwise.

4. Medical Treatment

I authorize ZSPORTS to seek emergency medical treatment for me/my child in the event of an injury or illness while participating in academy activities. I understand that ZSports is not responsible for any medical expenses incurred.

5. Indemnification

I agree to indemnify and hold harmless ZSPORTS, its directors, officers, employees, coaches, volunteers, agents, and representatives from any and all claims, demands, causes of action, or liabilities related to my/my child's participation in the academy's activities, including but not limited to personal injuries, property damage, or legal fees.

6. Compliance with Rules

I agree to comply with all rules, regulations, and instructions provided by ZSPORTS. I understand that failure to adhere to these guidelines may result in suspension or termination of participation.

7. Photographic Release

I grant ZSPORTS the right to use photographs, video recordings, or other media containing my/my child's image for promotional purposes, including but not limited to brochures, websites, and social media. I understand that I will not receive any compensation for such use.

8. Governing Law

This agreement shall be governed by and construed in accordance with the laws of England and Wales. Any legal actions arising out of or related to participation in ZSports activities shall be filed in courts located in Coventry, UK.

9. Severability

If any provision of this waiver is found to be unenforceable or invalid, that provision shall be limited or eliminated to the minimum extent necessary, and the remainder of this agreement shall otherwise remain in full force and effect.

10. Acknowledgment of Understanding

I have read this waiver of liability and assumption of risk agreement fully and understand its terms. I understand that I am giving up substantial rights, including the right to sue. I acknowledge that I am signing this agreement freely and voluntarily.

Signature of Participant (if 18 or older)

Date

Signature of Parent/Guardian (if participant is under 18)

Date

Printed Name of Parent/Guardian

Additional Details

For questions or concerns, please contact ZSPORTS Global at +44 7447 985072 or info@zsports.org.

Emergency Contact: Please provide emergency contact details below:

Name: _____

Phone Number: _____

Relationship: _____