

NFAL COVID-19 WAIVER FOR YOUTH LEAGUE

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing. As well as Spotlight 29 casino and NFAL. I acknowledge that Spotlight 29 Casino and NFAL has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19. I further acknowledge that Neither Spotlight 29 Casino and NFAL cannot guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, staff, and other teammates as well as coaches and their families. Therefor Recognizing the possibility of physical injury associated with soccer and COVID-19, in consideration for Spotlight 29 Casino and NFAL and its affiliates accepting the registrant for its soccer programs and activities I hereby release, discharge and/or otherwise indemnify NFAL, Spotlight 29 Casino (aka Coachella Crossroads Complex) and its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant's participation in the Program's.

FOR NFAL PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION) This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I, for myself, my spouse, and child/ward, do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releases for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, **EVEN IF ARISING FROM THEIR NEGLIGENCE**, to the fullest extent provided by law.

Name of Participant: _____

Participant Signature: _____ Date signed: _____

parent/guardian (Print): _____

Parent guardian/signature: _____

Date signed: _____

The signed waiver/release should be kept on file by the sports organization for at least 2 years and possibly longer if the player has contracted a serious illness.