



Chattanooga FC Academy Events Waiver of Liability

PLAYER'S FULL NAME _____ **M OR F (circle one)** **DOB** ____/____/____

I, the parent/legal guardian of the above named player, a minor ("Registrant"), agree to abide by the rules of Chattanooga FC Academy ("CFCA") and all other affiliated organizations.

Recognizing the possibility of physical injury or illness associated with soccer/athlete events, as more fully outlined below, and in consideration for CFCA and its affiliates accepting the Registrant to participate in CFCA's soccer/athlete event, I hereby release, discharge, and/or otherwise indemnify CFCA and all other affiliated organizations, their employees and other associated personnel (hereinafter the "Released Parties"), against any claim by or on behalf of the Registrant as a result of the Registrant's participation in the programs of CFC. Further, I, the parent/legal guardian of the Registrant named above, agree to the following individually and on behalf of Registrant:

I agree that if I engage in this recreational activity, it is done at my own risk and I assume the risk of any and all injury and/or damage while engaging in said recreational activity. My assumption of risk includes, without limitation, injuries from uneven or irregular playing surfaces, injuries from contact with equipment or from equipment failures, injuries from physical contact with other players, or injuries incurred while performing the physical activities inherent in participation in this activity.

ILLNESS AND INFECTIOUS DISEASES

1. Participation includes possible exposure to an illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe or feel any symptom of illness during my presence or participation, I will remove myself from participation and bring attention of such to the nearest coach or staff member immediately; and,

I agree that I am voluntarily participating in the aforementioned activities and using the facilities and premises and assume all risk of injury, illness, damage or loss to me of my property that might result, including, without limitation, any loss or theft of any personal property.

Further, I agree on behalf of myself (and all your personal representatives, heirs, executors administrators, agents and assigns) to release and discharge the Released Parties from any and all claims or causes of action (known and unknown) arising out of the negligence of the Released Parties, whether active or passive.

This waiver and release of liability includes, without limitation, injuries which occur as a result of (a) my use of any equipment or facilities which may malfunction or break, (b) improper maintenance of any exercise equipment or facilities, (c) negligent instruction or supervision, and (d) slipping and falling for any reason, including negligent inspection or maintenance of any facility. By execution of this Waiver and Liability and Medical Release Agreement I hereby agree to indemnify and hold harmless the Released Parties from any loss, liability, damage or cost the Released Parties may incur due to participation in CFCA activity participation. I further expressly agree that the foregoing release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by law in the State of Tennessee and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS WAIVER AND RELEASE AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY AND EXPRESS ASSUMPTION OF RISK AND INDEMNITY AGREEMENT. I AM AWARE AND AGREE THAT BY EXECUTING THIS WAIVER AND RELEASE, I AM GIVING UP MY RIGHT TO BRING LEGAL ACTION OR ASSERT A CLAIM AGAINST THE RELEASED PARTIES FOR THEIR NEGLIGENCE OR FOR ANY DEFECTIVE PRODUCT ENCOUNTERED DURING PARTICIPATION. I HAVE READ AND VOLUNTARILY SIGNED THE WAIVER AND RELEASE AND FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENTS OR INDUCEMENT APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE.

Full Name of Authorized Parent/Legal Guardian (Print) _____

Signature of Parent/Legal Guardian _____ Signature Date ____/____/____