



**2021 CIRCLE CITY COUGARS VOLLEYBALL
YOUTH WAIVER AND RELEASE OF LIABILITY**

In consideration of being allowed to participate in any way in Circle City Cougars (CCC) volleyball related events and activities, the undersigned:

1. Agree that the parent(s) and/or legal guardian(s) of the participant should inspect the facilities and equipment to be used, and if the parent or guardian believes anything is unsafe, he or she should immediately advise supervisor (advisor, manager, etc.) of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each member/participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions, or negligence but the action, inaction, and negligence of others, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability, or death.
4. Release, waive, discharge and covenant not to sue CCC volleyball, its affiliated clubs, their respective administrators, directors, agents, and other employees of the organization, other members/participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors or premises used to conduct the event, all of which are hereinafter referred to as "releases," from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death and damage to property, caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise.
5. Consent and agree that CCC volleyball and/or their coaches, agents, representatives, or volunteers may take photographs or digital recordings of participants during the events and use these in any and all media for training or promotional purposes.

I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

Print Participant's Name and Age

Signature (if under 18 years Parent or Guardian must sign)

Date

Address

Telephone #