



**Greenhaven Soccer Club of Sacramento (GHSC)
Assumption of Risk and Waiver of Liability Form**

In consideration of being allowed to participate in any way in GHSC instruction, or competition, whether involving team or individual events and activities (Activity), the undersigned acknowledges, appreciates, and agrees that:

1. Participation in any sport exposes the participant to the risk of injury or death. Injuries include death, serious neck and spinal injuries, paralyzes, brain damage, injury to vital organs, bones, joints, muscles and tendons, heat injuries, psychological/emotional injuries, etc.
2. The risk to have direct or indirect contact with individuals who have been exposed to and/or diagnosed with one or more communicable diseases, including but not limited to COVID-19 or other medical conditions, diseases, or maladies, and/or any mutation or variation thereof does exist and it is impossible to eliminate the risk that I, or my child, could become infected through contact with or close proximity to an individual with a communicable disease;
3. Contracting the COVID-19 may result in serious health issues for the participant and/or individuals the participant subsequently comes into contact with, and while particular rules, equipment, and personal discipline may reduce the risk of contracting the virus, the risk can never be completely removed;
4. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual, significant hazard during my presence or participation, I will remove myself from participation and bring such hazard to the attention of the nearest official immediately; and,
5. I am voluntarily participating in this Activity. I am aware of the risks associated with traveling to/from and participating in this Activity, which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and/or death. I understand that these injuries or outcomes may arise from my own or other's actions, inaction, or negligence; conditions related to travel; or the condition of the Activity location(s). **NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOWN OR UNKNOWN TO ME, OF MY PARTICIPATION IN THIS ACTIVITY, INCLUDING TRAVEL TO, FROM AND DURING THE ACTIVITY.**
6. I agree to **hold GHSC harmless** from any and all claims, including attorney's fees or damage to my personal property, that may occur as a result of my participation in this Activity, including travel to, from and during the Activity. If the GHSC incurs any of these types of expenses, I agree to reimburse GHSC.

7. If medical treatment is necessary, I authorize GHSC to obtain medical treatment and agree to be financially responsible for any costs incurred as a result of such treatment. I will not hold GHSC responsible for any claims resulting from medical treatment. I am aware and understand that I should carry my own health insurance and that GHSC does not provide health insurance for participating.
8. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS, GHSC, its officers, officials, agents and/or employees, other participants, sponsoring agencies, directors, sponsors, advertisers, and, if applicable, owners and lessors of the premises used to conduct the event (collectively, the "Releasees"), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, including attorney fees, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.
9. I am 18 years or older. I UNDERSTAND THE LEGAL CONSEQUENCES OF SIGNING THIS DOCUMENT, INCLUDING (A) RELEASING GHSC FROM ALL LIABILITY, (B) PROMISING NOT TO SUE GHSC, (C) AND ASSUMING ALL RISKS OF PARTICIPATING IN THIS ACTIVITY, INCLUDING TRAVEL TO, FROM AND DURING THE ACTIVITY
10. FOR PARENT/GUARDIAN OF PARTICIPANT OF MINORITY AGE: This is to certify that I, as parent/legal guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE
11. I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms. A copy of this agreement shall suffice as original.
12. I have read this two (2)-page document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

I agree, on behalf of myself and my child, to abide by the terms of this release, which includes the terms of the GHSC Code of Conduct.

Parent Name

Child Name

Parent Signature / Date