SPORTS WAIVERS - under 18

PLAYER NAME:			D.O.B	1	/
ADDRESS:					
CITY/STATE/ZIP:					
GUARDIAN NAME:		E-MAIL:			
Phone Numbers:	: (Please Circle Daytime Number to Call In Cas	se of Cancellation.) May we	text your cell#	f Y / N	
	,	·	-		
	YMCA RELEASE				
to participate in sports for the YI heirs, executors, administrators, o by participation in the Sports proo I hereby attest that I am physica officials to take proper steps to	<u>'s</u> release is made of MCA, I hereby release the YMCA from all or assignees may have against the YMCA gram and knowingly assume the risk that allly fit and have no ailment that should poprovide medical attention should I be inficials harmless therefore. I have read this ance.	action, causes of action, d and all personal injuries, I may be injured in such ac revent me from participat njured while playing or be	amages, clain known or unk tivity. ing in sports. ing transport	ns or demar known, I hav I further a ted to or fr	nds which I, my re or may incur uthorize YMCA rom any YMCA
Signed:		Date :			
Diagon list any booth says poods	the YMCA should be aware of:				
riease list ally liealth care lieeus i	the TMCA Should be aware or:				
Family Doctor:	Phone number:	Health Insurance	Carrier:		
	<u>CONDUCT RE</u>	<u>LEASE</u>			
with me. In consideration of my	sponsibility for my conduct and the cond playing with the YMCA, I also understanct result of friends, family members, or mes, or other parents attending).	d that I am responsible fo	r any fines le	vied agains	t the YMCA by
Signed:		Date :			

HEALTH SAFTEY RELEASE

COMMUNICABLE DISEASE RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT In consideration of being allowed to participate on behalf of the ____Bedford YMCA Sports Programs__, event or program (the 'Program') including, but not limited to, events and activities, observation or use of facilities or equipment, participation in or acting as a spectator during any program (collectively 'Participation'), the undersigned acknowledges, appreciates, and agrees that, on behalf of him or herself and any of his or her minor children: 1. I am aware there are risks of exposure to directly or indirectly arising out of, contributed to, by, or resulting from an outbreak of any and all communicable disease, including but not limited to, the virus "severe acute respiratory syndrome

- coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof, as a result of my Participation in the Program.
- 2. I am aware that my Participation or that of my minor children includes a risk of possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19; and that while particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
- 3. 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 the Participation of any of my minor children; and,
- 4. I willingly agree, on behalf of myself and any of my minor children, to comply with the stated, reasonable, and/or customary terms and conditions related to my Participation—and that of my minor children—as regards protection against infectious diseases; and if I observe any unusual or significant hazard during my presence or participation, I will remove myself and my minor children, as appropriate, from Participation and bring such hazard to the attention of the nearest official immediately;
- 5. I, for myself and on behalf of my heirs, assigns, personal representatives, children and next of kin ('Releasors'), HEREBY RELEASE AND HOLD HARMLESS Bedford YMCA Sports Program , it officers, officials, agents, consultants, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ('Releasees'), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

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. Participant's Name Participant's Signature Date Age FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE (UNDER AGE 18 AT TIME OF REGISTRATION): This is to certify that I, as parent/quardian with legal responsibility for the below-named minor child participant, do consent and agree to his/her release as provided above of all the Releasees, and for myself and for the other Releasors I do hereby release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child's involvement or Participation in the Program as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law. Parent/Guardian Name Minor Child Participant's Name

Date

Parent/Guardian Signature