

CHICAGO FUTSAL ACADEMY

Waiver and Release

As consideration for being allowed to enter Chicago Futsal Academy and/or participate in any party and/or program at Chicago Futsal Academy, the undersigned, on his or her behalf, and on the behalf of the Participant(s) identified below, acknowledges, appreciates, understands and agrees to the following:

I am the Participant:

Name of Parent or Legal guardian

Or

I represent that I am the parent or legal guardian of the Participant(s) named below:

Participant Name

Date of Birth

Participant Name

Date of Birth

Participant Name

Date of Birth

ASSUMPTION OF RISK, RELEASE & INDEMNITY

All participants must sign a Waiver and Release before using these facilities. I agree that if you are present for any reason, have interaction of any kind with or from anyone else, engage in any physical exercise or activity or use these facility, I do so at my own risk. I assume this risk for all likely and unlikely, reasonably and unreasonably expected experiences or occurrences. This includes, without limitation, my use of any equipment, locker room, bathrooms, parking area, or sidewalk and my participation in any activity, program, or other instruction now or in the future made available. I agree that I am voluntarily participating in these activities and using the facilities and assuming all risk of injury or my contraction of any illness or medical condition that might result therefrom or any damage, loss or theft of any personal property. I agree on behalf of myself (and my personal representatives, heirs, executors, spouse, administrators, agents, assigns or others) to release and discharge us (and our affiliates, employees, agents, representatives, successors, and assigns) from any and all claims or causes of action arising out of our negligence. This Waiver and Release of all liability includes, without limitation, injuries which may occur as a result of (a) my use of this facility or its improper maintenance (b) our negligent instruction or supervision (c) our negligent hiring or negligent retention of any employee (d) loss of consortium (e) my slipping and falling while in this facility or on the surrounding premises or (f) first aid, emergency treatment or any other services which are negligently rendered or failed to be rendered by released parties, emergency personnel, or Good Samaritans, or our negligently preventing a Good Samaritan from rendering first aid.

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS WAIVER AND RELEASE AND FULLY UNDERSTANT THAT IT IS A RELEASE OF ALL LIABILITY, IN ADDITION, I DO HEREBY WAIVE ANY RIGHT THAT I MAY HAVE, BY OR ON BEHALF OR MYSELF, MY SPOUSE OR ANY CHILD (MINOR OR OTHERWISE), TO BRING A LEGAL ACTION OR ASSERT A CLAIM FOR INJURY OR LOSS OF ANY KIND AGAINST US FOR OUR NEGLIGENCE OR ARISING OUT OF OR RELATING TO PARTICIPATION BY ME, MY SPOUSE OR CHILD IN ANY OF THE ACTIVITIES, OF USE OF THE FACILITIES OR SERVICES WE PROVIDE AS DESCRIBED IN THIS PARAGRAPH, OR ON ACCOUNT OF ANY ILLNESS OR ACCIDENT, OR DAMAGE TO OR LOSS OF MY PERSONAL PROPERTY.

I agree to indemnify, defend and hold harmless Chicago Futsal Academy (and its affiliates, employees, agents, representatives, successors, assigns and others) from all claims, losses, damages and causes of action to which they may be subjected arising from or relating to participation by User, Member, or the parent, spouse, child (minor or otherwise) or guest of User or Participant in any of the activities, or facilities or services we provide, as further described in this Paragraph. Such indemnification will relieve Chicago Futsal Academy of the consequences of its own actions, inactions or negligence. I further agree to accept full responsibility for the cost of treatment for any injury to Participant, or parent, spouse child (minor or otherwise) or guest of Participant.

The participant acknowledges that soccer or any sporting event is an extreme test of a person's physical and mental limits and that participation in a soccer event can cause serious injury. With a full understanding of the potential risks, the participant hereby assumes the risks of participating in a soccer event. As such, the undersigned (You) agrees that he or she understands and voluntarily accepts this risk and agrees that CHICAGO FUTSAL ACADEMY, its employees, shareholders, or members, will not be liable for any injury, including and without limitation, personal, bodily or mental injury, economic loss or any damage to the undersigned, the undersigned's spouse, guest or relatives resulting from the negligence or other acts of CHICAGO FUTSAL ACADEMY. If there is any claim by anyone based on any injury, loss or damage described here, which involves the undersigned, any other participant under this Agreement, any of the undersigned's non-participant children or any guest or child which the undersigned or any participant under this Agreement, the undersigned agrees to hold harmless CHICAGO FUTSAL ACADEMY, its employees, shareholders, or members, and indemnifies all expenses relating to the claim and obligations resulting there from.

I acknowledge and understand that there are risks associated with participation in physical exercise activities and the use of this facility and inflatable equipment including but not limited to: contusions, fractures, scrapes, cuts, bumps, paralysis, or death.

I, for myself and the Participant(s) named, willingly assume the risks associated with participation and accept that there are also risks that may arise due to OTHER PARTICIPANTS which I also willingly assume.

I agree that the Participant(s) named and I shall comply with all stated and customary terms, posted safety signs, rules and verbal instructions as conditions for participation in any activity at the Chicago Futsal Academy.

I, for myself and the Participant(s) named, our heirs, assigns, representatives, and next of kin agree to hold harmless and indemnify Chicago Futsal Academy, Operators, Producers, Beneficiaries, their predecessors, parent, subsidiaries and affiliates, officers and employees from any and all injuries, liabilities or damages from participation.

I additionally agree to indemnify Chicago Futsal Academy, Operators, Producers, Beneficiaries, their predecessors, parent, subsidiaries and affiliates, officers and employees for any defense cost or expense arising from any and all claims, injuries, liabilities or damages arising from participation.

I agree to carry personal health insurance in case of sports injury.

I agree that prior to participating, they will inspect the facilities and equipment to be used, and if they believe that anything is unsafe, they will immediately advise their coach or the manager on duty of said condition, and refuse to participate.

I do hereby authorize Chicago Futsal Academy and its assigns to utilize any and all photographs, pictures or other likeness of me or anyone assigned guardianship to me, as they deem appropriate in its promotional material or team films.

I am of physical ability to participate and legally competent to understand and complete this agreement. I hereby execute this agreement without coercion.

Parent/Guardian/Participant Name (please print): _____

Parent/Guardian/Participant signature: _____

Emergency Contact Number: (____) _____ or (____) _____

Address _____

Email _____