

RELEASE OF LIABILITY, WAIVER OF CLAIMS

ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT

By signing this document you will waive certain legal rights, including the right to sue.

PLEASE READ CAREFULLY

AWARENESS AND ASSUMPTION OF RISK

I am aware that sports involve risks including risk of personal injury, death, property damage, expense and related loss, including loss of income. Included in these risks are negligence on the part of Flo Ministries and Pismo Arroyo Grande Rec Department, as well as its directors, officers, officials, employees and volunteers, other participants and owners of the facilities where the activities occur. I freely accept and fully assume all such risks and the possibility of personal injury, death, property damage, expense and related loss, including loss of income.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of Flo Soccer Ministries accepting my application to participate in this activity, I agree:

1. This is a continuous waiver (current and future years) and I waive any and all claims that I may have in future against Flo Ministries and Arroyo Grande Rec Dept, and OTHERS.
2. To release Flo/AG Rec Dept and OTHERS from any and all liability for any personal injury, death, property damage, expense and related loss, including loss of income that I or my next of kin may suffer as a result of my participation in this activity, due to any cause whatsoever, including negligence, breach of contract or breach of any statutory duty of care.
3. To hold harmless and indemnify Flo/AG Rec Dept and OTHERS from any and all liability for any damage to property of, or personal injury to, any third party, resulting from my participation in this activity.
4. That this agreement is binding on not only myself but my next of kin, heirs, executors, administrators and assigns.

I HAVE READ THIS AGREEMENT AND UNDERSTAND IT. I AM AWARE THAT BY SIGNING THIS DOCUMENT I AM WAIVING CERTAIN RIGHTS WHICH I OR MY NEXT OF KIN, HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST Flo/AG/ Rec Dept AND OTHERS. I WARRANT THAT AT THE TIME OF SIGNING, I AM PHYSICALLY FIT TO PARTICIPATE.

Signed this _____ day of _____, 20____.

Team Name _____

Signature of Applicant

(Under 18) Parent or Guardian

Please Print Name Clearly

Please Print Name Clearly