

### YORK COUNTY YOUTH FOOTBALL ASSOCIATION 2159 WHITE ST SUITE 3 Box 153 YORK PA 17404

### Waiver and Release of Liability – Minor 2020 SEASON

ASSOCIATION NAME-\_\_\_\_

# READ BEFORE SIGNING

IN CONSIDERATION OF \_\_\_\_\_, my child/ward, being allowed to participate in the York County Youth Football Association 2020 Season, 2020 Playoffs/ Championships and/ the football program at \_\_\_\_\_\_, the Home Organization, which is a organization not operated or controlled by YCYFA, despite its membership with YCYFA, the undersigned acknowledges and agrees that:

The risks of injury and illness {ex: communicable diseases such as MRSA, Influenza, and COVID-19} to my child from the activities involved in these programs are significant, including the potential for permanent disability and death, and while particular rules, equipment and personal discipline may reduce these risks, the risks of serious injury or illness do exist; and,

- 1. FOR MYSELF, SPOUSE AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES or others, and assume full responsibility for my child's participation; and,
- 2. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention to the nearest official immediately; and,
- 3. I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS York County Youth Football Association; its directors, officers, officials, agents, employees, volunteers, 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 incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
- 4. I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all of the above Releasees from any and all liabilities incident to by involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.
- 5. I, the parent/guardian, assert that I have explained to my child/ward: the risks of the activity, his/her responsibilities for adhering to the rules and regulations, and that my child/ward understands this agreement.

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### 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.

Print Name of Parent/Guardian:

Parent/Guardian Signature: Date Signed:

## UNDERSTANDING OF RISK

I understand the seriousness of the risks involved in participating in the program, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

Print Name of Participant: Participant's Signature: \_\_\_\_\_ Date Signed: \_\_\_