



Player/Coach/Volunteer

Last Name: _____ First Name: _____

PARENT/LEGAL GUARDIAN (if Guest is under 18 years old or subject to guardianship)

Mother's Name: _____ Phone: _____

Father's Name: _____ Phone: _____

WAIVER: Covid-19 Release & Liability

Acceptance of Risk; Release.

Wherefore in consideration of the benefit that my Athlete receives from participation in Folsom American Little League and the benefit to Folsom American Little League of resuming practices and games as soon as possible. In acknowledgement that to gain these mutual benefits the Athlete and others must perform practices and games in person with other individuals. Additionally, the resuming of these activities will by necessity involve situations where social distancing may be difficult and in many instances impossible, I hereby enter into this waiver and release of liability.

1. Indemnification. I am fully aware that there are a number of risks associated with me and/or my child participating in activities with the Folsom American Little League, becoming a member or guest, umpiring, training, practicing, or playing in games during the COVID-19 pandemic under the circumstances, including without limitation:

(a) I and/or my child or our visitors could contract COVID-19 or other diseases such as the flu or legionnaires disease which could result in a serious medical condition requiring medical treatment in a hospital or could possibly lead to death; and

(b) I and/or my child or our visitors will be subject to normal risks associated participating in activities with the Folsom American Little League such as physical injuries or even death or loss or damage to personal property, including without limitation, from slips or falls, food poisoning or allergic reaction to food served at an event, physical or verbal altercations with guests, electrocution from equipment such as a pitching machine, netting, hit by ball, hit by hitting bat, terrorist or other violence.

(d) On behalf of myself and/or my child and our heirs, successors and assigns, I knowingly and freely, assume all such risks, both known and unknown, relating to my and/or my child's participation in activities with the Folsom American Little League, and being a guest, athlete, customer of Folsom American Little League described above, and I hereby forever release, waive, relinquish, and discharge Folsom American Little League along with their officers, directors, managers, members, coaches, officials, trustees, agents, employees, or other representatives, and their successors and assignees (collectively, "Folsom American Little League"), from any and all claims, demands, liabilities, rights, damages, expenses, and causes of action of whatever kind or nature, and other losses of any kind, whether known or unknown, foreseen or unforeseen, (collectively, "Damages") as a result of me and/or my child being a guest, customer, or athlete with the Folsom American Little League as described above, including but not limited to those related to the above described personal

Injuries, death, disease or property losses, or any other loss, and including but not limited to claims based on the alleged negligence of any facility or Representative or any other person.

(e) I further promise not to sue Folsom American Little League or its representatives and agree to indemnify and hold them harmless from any and all Damages resulting from my and/or my child's being a guest or participating in activities with the Folsom American Little League. I also agree not to participate as witness for anyone suing Folsom American Little League in connection with any of the risks discussed in this waiver.

READ CAREFULLY -- BY SIGNING THIS DOCUMENT YOU MAY GIVE UP IMPORTANT LEGAL RIGHTS.

SIGNATURE _____ PRINT NAME: _____

DATE: _____

PARENT/LEGAL GUARDIAN SIGNATURE (if Guest is under 18 years old or subject to guardianship)

Date _____

Date _____