

BONSALL FALLBROOK LITTLE LEAGUE PO BOX 2734 FALLBROOK, CA 92028 T 760-385-8622



ASSUMPTION OF THE RISK AND WAIVER OF LIABILITY RELATING TO CORONAVIRUS/COVID-19

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending and participating in programs and activities sponsored by Bonsall Fallbrook Little League ("BFLL") and that such exposure or infection may result in personal injury, illness, permanent disability, and death.

I understand that the risk of becoming exposed to or infected by COVID-19 at BFLL practices and subsequent games (whenever those begin) may result from actions, omissions, or negligence of myself and others, including, but not limited to, BFLL managers, coaches, Board Members, Umpires, and other teammates/participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child or myself (including, but not limited to, personal injury, illness, permanent disability, and death), illness, damage, loss, claim, liability, or expense, or any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at BFLL practices and games or participation in programming ("Claims").

On my behalf, and on behalf of my child(ren), I hereby release, covenant not to sue, discharge, and hold harmless BFLL, its agents and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of BFLL, its agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any of BFLL's practices, games, or programming.

PARENT SIGNATURE:	 	DATE:	
PARENT NAME:			
TAILLY IVAIVIL			
CHILD(REN) NAME(S):	 		