

Team Liability Waiver

By submitting this form and in consideration of and as part payment for the right to participate in the activity of the RRVSC, team members of _____ hereby acknowledge the existence of risk and assume all risk connected with the activity described above, and including by way of example, acts of negligence by the School, Crown Mountain Park, RRVSC or Town of Carbondale or any entity or person acting on its behalf.

CONSENT OF MEDICAL TREATMENT Pursuant to Section 15-14-104, C.R.S., I, as the parent or guardian of any registered player under the age of 18 OR as the player/coach myself delegate to RRVSC, Inc. by its designated representative, the power to consent to and contact for medical or dental treatment for my child in my behalf. This power of attorney shall not be affected by my disability.

In consideration of being allowed to participate in any way in Club programs, and related events and activities, I, and/or the minor child(ren) state as follows:

1. I understand that although the Club has taken precautions to provide proper organization, supervision, instruction and equipment for the services being offered, it is impossible for the Club to guarantee absolute safety from infection by the corona virus. Also, I understand that I share the responsibility for safety during all activities, and I assume that responsibility. I will make my instructors aware to the best of my ability of any questions or concerns regarding my understanding of safety standards, guidelines, procedures and my ability to participate at any point during any activity. I will also take steps to ensure the health of my child(ren) before the child participates in any soccer activity.

2. I understand that risks during soccer activities include possible exposure to the corona virus. In addition, risks of soccer activities include, but are not limited to loss or damage to personal property, injury, permanent disability, fatality, exposure to inclement weather, slipping, falling, insect or animal bites, being struck by falling objects, hypothermia (cold exposure), hyperthermia (heat exposure), and that severe social or economic losses that may result from any such incident. I also understand that such accidents or illnesses may occur in remote areas without easy access to medical facilities or while traveling to and from the activity sites. Further, there may be other risks not known to me or not reasonably foreseeable at this time.

3. I assume all the foregoing risks and accept personal responsibility for the damages due to such injury, permanent disability or death resulting from participation in any Club activity.

After you have reviewed the acknowledgment of risk and waiver of liability of this complete letter and if you understand and agree with its contents, please e-sign in the appropriate places and complete registration. If you are the parent or legal guardian of a student, please read this document to the child(ren), and if you both agree and understand their content, place YOUR signature in the appropriate places and complete registration. If you do not understand and/or agree with any part of this complete letter please do not continue with registration.

I voluntarily agree to assume all of the foregoing risks described in this Waiver and accept sole responsibility for any injury to my child(ren) and myself (including, but not limited to, personal injury, disability or death), illness, damage, monetary loss, claim, liability, or expense of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s participation at the Club or Club activities ("Claims"). On my behalf, and on behalf of my child(ren), I hereby release the Club, its agents,

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coaches, chaperones, representatives and employees from any and all claims, demands, and causes of action, whether resulting from negligence or otherwise, of every nature and in conjunction with a Club activity as set forth on the reverse side of this Waiver.

In addition, by signing this agreement and registering with the Club, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and/or I may be exposed to or infected by COVID-19 by attending Club activities. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Club its employees, agents, and representatives, whether a COVID-19 infection occurs before, during or after attendance at the Club activities.

SIGNATURE PAGE

Team Name: _____

NAME	SIGNATURE	DATE
1. _____	_____	_____
2. _____	_____	_____
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