

YOUTH GET BACK LEAGUE



is a

Waiver and Release of Liability - Minor

ASSOCIATION NAME - _____

READ REFORE SIGNING

	READ BEFORE SIGNING
basketball and or cheer program	, child/adult, being allowed to participate in the Youth Get Back League, LLC, and or t, the Local Organization, which
legally distinct and organization not o	perated or controlled by AAU, Inc. the undersigned acknowledges and agrees that:
involved in these programs are signifi	municable diseases such as MRSA, influenza, and COVID-19) to my child from the activities ant, including the potential for permanent disability and death, and while particular rules, by reduce these risks, the risks of serious injury and illness do exist; and,
	D, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN NCE OF THE RELEASES or others, and assume full responsibility for my child's
unusual significant concern in	ne program's stated and customary terms and conditions for participation. If I observe any ny child's readiness for participation and/or in the program itself, I will remove my child fron an attention of the nearest official immediately; and,
RELEASE AND HOLD HARMLESS Nother participants, sponsoring age the event ("Releasees"), WITH RE property incident to my child's inv	, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY outh Get Back League, LLC.; its directors, officers, officials, agents, employees, volunteers cies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conditional SPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person colvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE CELEASEES OR OTHERWISE, to the fullest extent permitted by law.
4. I, for myself, my spouse, my chil- HEREBY INDEMNIFY AND HOLI or participation in these progra 5. I, the parent/guardian, assert th	I, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HARMLESS all the above Releases from any and all liabilities incident to my involvement ms, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law. It I have explained to my child/ward: the risks of the activity, his/her responsibilities for ations, and that my child/ward understands this agreement.
	BILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT
Print Name of Parent/Guardian:	
Parent/Guardian Signature:UNDERSTANDIN	Date Signed: G OF RISK
I understand the seriousness of the adhering to rules and regulation, a	risks involved in participating in this program, my personal responsibilities for accept them as a participant.
Print Name of Participant:	

NOTE: This form as with any and all forms used by your Association should be reviewed by your local counsel for compliance with any state or local statutes. This form should be kept on file for a minimum of 7 years, longer in the event of an injury. Please confer with your local attorney for advice as to the appropriate maintenance and storage term for this and all such forms.

Participant's Signature: _____ Date Signed: _____