

Mission Basketball Academy and WI Crusaders Participation Waiver

In exchange for the services and support offered by Mission Basketball Academy, Inc., a Wisconsin Not-For-Profit Corporation("ACADEMY") to those taking part in all the activities and services(collectively the "ACTIVITY")offered as part of being a participant in the ACADEMY or tournaments, the undersigned participant or minor participant by and through his or her parents or legal guardians (collectively the "PARTICIPANT") agrees to release and indemnify the ACADEMY from any viruses (Covid-19 or any Virus), injuries or accidents he or she may suffer as a result of the ACTIVITY. UNDERSTANDING THE RISK PARTICIPANT understands and acknowledges that there are serious risks associated with this ACTIVITY including, but not limited to risks related to tournaments, tryouts, practices, training activities given to do on a participants own time (stretching, conditioning, weight training, etc.), one on one coaching, and tournaments. RELEASE AND INDEMNIFICATION AGREEMENT FOR INJURIES TO UNDERSIGNED PARTICIPANT agrees that he or she will assume complete and absolute responsibility for all risks related to any injuries or property damage which the undersigned may sustain as a result of the ACTIVITY. PARTICIPANT agrees not to sue the ACADEMY or its respective agents, assigns, owners, corporate subsidiaries, affiliates, officers, directors, or insurers from any actions and agrees to release and indemnify the same from any actions, suits, damages, claims or judgments that may result from any sickness (Covid - 19 or any virus), personal injury or property damage which the PARTICIPANT may sustain while participating in the ACTIVITY, even if the injuries or damage are caused by the negligence of the ACADEMY or its PARTICIPANTS and their respective agents, assigns, owners, corporate subsidiaries, affiliates, officers, or directors. This release of liability shall be full and final compromise and settlement of any claims for any injuries or property damage suffered by the PARTICIPANT as a result of the ACTIVITY. INDEMNIFICATION AGREEMENT FOR INJURIES CAUSED TO OTHERS In addition, PARTICIPANT agrees to indemnify the ACADEMY and its respective agents, assigns, owners, corporate subsidiaries, affiliates, officers, directors, or insurers from any and all actions, suits, damages, claims or judgments that may result from any personal injury or property damage which any PARTICIPANTS or other persons may sustain as a result of the undersigned PARTICIPANT'S conduct during or related to the ACTIVITY. STATEMENT OF UNDERSTANDING I agree that I have read and understand this RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT. I expressly acknowledge that I am signing this Agreement on behalf of myself (only if 18 years old or older), my minor child, my family, spouse, heirs, executors and assigns, anyone acting on my behalf, including attorneys, agents, insurers and representatives. If the PARTICIPANT is a minor child, by signing this agreement I am affirming that I am legal guardian or the biological parent of the minor child and enter into this Agreement on behalf of all legal guardians or both biological parents and the ACADEMY can rely on the same and enforce the Agreement as if all legal guardians or both biological parents signed this Agreement. I acknowledge that I have had sufficient time to read this Agreement and have had the opportunity to consider the consequences of signing this Agreement. n exchange for the services and support offered by Mission Basketball Academy, Inc., a Wisconsin Not-For-Profit Corporation("ACADEMY") to those taking part in all the activities and services(collectively the "ACTIVITY")offered as part of being a participant in the ACADEMY or tournaments, the undersigned participant or minor participant by and through his or her parents or legal guardians (collectively the "PARTICIPANT") agrees to release and indemnify the ACADEMY from any viruses (Covid-19 or any Virus), injuries or accidents he or she may suffer as a result of the ACTIVITY. 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Signature Date ____ - ____ - 20____ Participant's Full Name _____

Parent/Guardians Name (Print) _____ Parent/Guardians Name (Signature)_____

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