



ELKHORN ATHLETIC ASSOCIATION WAIVER OF LIABILITY

Participant's Name _____ Date of Birth ____ / ____ / ____

Address _____ City/State Zip _____

Gender (circle one) M F Age _____ Grade _____ Email _____

Home Phone _____ Work Phone _____ Cell Phone _____

Emergency Contact _____

Relationship to Participant _____

Day Time Phone Number _____ Alternate Phone Number _____

AGREEMENT, WAIVER AND RELEASE: In exchange for being permitted by Elkhorn Athletic Association, Inc. ("EAA") to participate in activities at EAA fields or other facilities used by the organization, I hereby waive, release and discharge any and all claims for damage for personal injury, death or property damage which I may have, or which may hereafter accrue to me, as a result of my, or the identified Participant's, participation in activities at said fields or facilities. I understand that this Waiver of Liability is intended to address all of the risks of any kind associated with my participation in any aspect of EAA activities, including, particularly, such risks created by actions, inaction, carelessness, or negligence on the part of EAA or its directors, officers, employees, agents, volunteers, successors, or assigns. I assume all risks, known and unknown, foreseeable and unforeseeable, in any way connected with my participation in EAA activities. I accept personal responsibility for any liability, injury, loss, or damage in any way connected with my participation in EAA activities. I agree to indemnify and hold harmless EAA and their directors, officers, employees, agents, volunteers, successors, and assigns from all claims, and the cost of defending any Claim I might make, or that might be made on my behalf, that is in any way connected with or arising out of my participation in EAA activities, whether or not caused in whole or in part by the negligence or other misconduct of EAA or any of the individuals mentioned above. This Waiver of Liability shall be binding upon my relatives, personal representatives, heirs, beneficiaries, next of kin, or assigns and shall inure to the benefit of EAA and their successors and assigns.

I understand that by participating in EAA activities photo images may be taken of me and/or the Participant by EAA, and I am consenting to the use of these photo images by EAA for the organization's publications and websites.

CONSENT OF PARENT/GUARDIAN (If Participant is a minor) I am the parent or legal guardian of the Participant listed above. I hereby consent that the Participant may participate in activities at this, or any other EAA facility or field and I hereby execute this Waiver of Liability on his/her behalf. I hereby affirmatively state that said Participant is physically able to participate in said activity. I hereby agree to indemnify and hold harmless EAA, its directors, officers, employees, agents, volunteers, successors, or

assigns from any loss, liability, damage, cost or expense that they may incur as a result of the Participant's death, injury, property damage, or other claims or damages that said Participant may sustain while engaging in activities at any EAA facility or field.

The undersigned further agrees to (a) maintain reasonable accident and liability insurance while the player is participating in EAA activities, and (b) hold harmless the Releases from all liability, loss or damage resulting from failure to maintain such insurance.

I HAVE CAREFULLY READ BOTH THE FRONT AND BACK OF THIS WAIVER OF LIABILITY AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND EAA AND I SIGN IT VOLUNTARILY AND OF MY OWN FREE WILL.

Print Name _____ Relationship _____

Signature _____ Date _____