



## ACCIDENT WAIVER & RELEASE OF LIABILITY

**RELEASE AND INDEMNITY:** In consideration of allowing me to participate in 7v7 Football, I agree to assume the risks incidental to such participation (risks may include, among others, muscle injuries and broken bones) and on behalf of myself, and my heirs, executors and administrators, hereby waive, release, covenant not to sue, and forever discharge the Releasees defined below, of and from all liabilities, claims, actions and causes of action, damages, costs and/or expenses of any nature including, but not limited to, attorney's fees and costs arising out of or in any way connected with my participation in such activity. I further agree to indemnify and hold each of the Releasees harmless against any and all such liabilities, claims, actions and causes of action, damages, costs or expenses, including, but not limited to, attorney's fees and costs. I understand that this waiver and release and indemnity agreement includes any claims based on the negligence, action or inaction of any of the above Releasees and covers Coronavirus (COVID-19) bodily injury (including death) and property damage, whether suffered by me before, during or after such participation. The Releasees are: KC Elite Mongoose 7v7, Kansas City Elite Mongoose 7v7, all sponsors of the event, club 7v7, and the parent, subsidiary and affiliated companies, and officers, directors, employees, agents, volunteers, independent contractors, representatives, affiliates, successors and assigns of each of the foregoing.

**PHYSICAL CONDITION/MEDICAL AUTHORIZATION:** I hereby certify that I am physically fit for participation with KC ELITE MONGOOSE 7V7, KANSAS CITY ELITE MONGOOSE 7V7 in Try-Outs, Practices, Events, Games and Tournaments and have the skill level required in conjunction with the Events, and I have not been advised otherwise. I further authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by the attending medical personnel if I am not able to act on my own behalf, at my cost; however, I acknowledge that Releasees shall have no duty, obligation, or liability arising out of the provision of, or failure to provide, medical treatment. I hereby certify that I am physically fit and do not have Coronavirus (COVID-19) or show any symptoms of Coronavirus (COVID19).

**EQUIPMENT AND FACILITIES INSPECTION:** I agree that before I participate in any activity conducted in conjunction with the Event, I will inspect the related facilities and equipment, and I will immediately advise the Event manager of any unsafe condition that I observe. I will refuse to participate in the Event until all unsafe conditions observed by me have been remedied.

**PUBLICITY RIGHTS:** I further grant the Releasees the right to photograph and/or videotape me and further to display, use, and/or otherwise exploit my name, face, likeness, voice and appearance forever and throughout the world in all media whether now known or hereafter devised (including without limitation, television, radio, motion pictures, film, print, and the Internet, including but not limited to webcasts, Releasees'



website(s), Facebook, and YouTube) in connection with exhibitions, publicity, advertising, promotional materials and all other lawful purposes, including without limitation publication of Event results and standings, without reservation or limitation, or further approval. I understand that I will receive no monetary or other compensation for, and hereby release, indemnify, and hold Releasees harmless from, all claims, demands, and liabilities whatsoever in connection with, the use of my name, face, likeness, voice and appearance. The Releasees are however under no obligation to exercise said rights granted herein.

Student Athlete Name (print) \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Email \_\_\_\_\_

GPA \_\_\_\_\_ SAT \_\_\_\_\_ ACT \_\_\_\_\_ Position \_\_\_\_\_

Student Athlete Phone Number \_\_\_\_\_

Parent Phone Number \_\_\_\_\_

**I/ We, by signing below, do hereby agree to all aspects of the above-stated in this ACCIDENT WAIVER & RELEASE OF LIABILITY pertaining to the Student Athlete named above.**

Athlete Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of  
Parent(s)/  
Guardian(s) \_\_\_\_\_ Date \_\_\_\_\_



# COVID-19 WAIVER RELEASE FORM

The World Health Organization has declared the novel Coronavirus (COVID-19) a worldwide pandemic. Due to its capacity to transmit from person-to-person through respiratory droplets, the government has set recommendations, guidelines, and some prohibitions which Kansas City Elite Mongoose 7v7 adheres to comply.

In consideration of my participation in the foregoing, the undersigned acknowledge and agree to the following:  
(CHECK THE FOLLOWING BOXES)

- o I am aware of the existence of the risk on my physical appearance to the venue and my participation to the activity of the Organization that may cause injury or illness such as, but not limited to Influenza, MRSA, or COVID-19 that may lead to paralysis or death.
- o I have not experienced symptoms that of fever, fatigue, difficulty in breathing, or dry cough or exhibiting any other symptoms relating to COVID-19 or any communicable disease within the last 14 days.
- o I have not, nor any member(s) of my household, traveled by sea or by air, internationally within the past 30 days.
- o I did not, nor any member of my household, visit any area within the United States that was reported to be highly affected by COVID-19, in the last 30 days.
- o I have not been, nor any member(s) of my household, diagnosed to be infected of COVID-19 virus within the last 30 days.

Following the pronouncements above I hereby declare the following:  
(CHECK THE FOLLOWING BOXES)

- o I am fully and personally responsible for my own safety and actions while and during my participation and I recognize that I may be in any case be at risk of contracting COVID-19.
- o With full knowledge of the risks involved, I hereby release, waive, discharge the Organization, its board, officers, independent contractors, affiliates, employees, representatives, successors, and assigns from any and all liabilities, claims, demands, actions, and causes of action whatsoever, directly or indirectly arising out of or related to any loss, damage, injury, or death, that may be sustained by me related to COVID-19 while participating in any activity while in, on, or around the premises or while using the facilities that may lead to unintentional exposure or harm due to COVID-19.
- o I agree to indemnify, defend, and hold harmless the Organization from and against any and all costs, expenses, damages, lawsuits, and/or liabilities or claims arising whether directly or indirectly from or related to any and all claims made by or against any of the released party due to injury, loss, or death from or related to COVID-19.

By signing below I acknowledge that I have read the foregoing Liability Release Waiver and understand its contents; that I am at least eighteen (18) years old or parent / guardian of a participating minor and fully competent to give my consent; That I have been sufficiently informed of the risks involved and give my voluntary consent in signing it as my own free act and deed; that I give my voluntary consent in signing this Liability Release Waiver as my own free act and deed with full intention to be bound by the same, and free from any inducement or representation.

This waiver will remain effective until laws and mandates relevant to COVID-19 are lifted.

PRINT NAME \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

SIGNATURE \_\_\_\_\_