



TRI-STATE WARRIORS

WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the Tri-State Warriors football Team, its related events, and activities from October 16, 2021 – July 11, 2022, I acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the risk of bodily injury and potentially death, and while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,

2. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE Tri-State Warriors Women's Football Team, LLC

their officers, officials, agents and/or employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, owners, and lessors of premises used for the activity ("Releasees"),

WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property associated with my presence or participation, WHETHER ARISING FROM THE NEGLIGENCE OF

THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law; and,

3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,

4. I willingly agree to comply with the stated and customary terms and conditions for participation.

If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of a member of the Tri-State Warriors coaching staff or owner immediately; and,

5. I acknowledge that I am required to carry medical insurance, and that I am currently insured.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PLAYER'S SIGNATURE X _____ Date signed: _____

PLAYER'S PRINTED NAME X _____ Birthdate: _____