CAPE ANN YOUTH FOOTBALL LEAGUE

ASSUMPTION AND ACKNOWLEDGMENT OF RISKS <u>AND</u> RELEASE OF LIABILITY AGREEMENT

In consideration of being allowed to participate in any way for the **Cape Ann Youth Football League**, its related events and activities, the undersigned, acknowledges, appreciates, and agrees that:

- 1) The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
- 2) 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,
- 3) 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 bring such to the attention of the nearest official immediately; and
- 4) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS the Cape Ann Youth Football League, its officers, officials, agents and/or employees, other participants sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releases"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

FREELY AND VOLUNTARILY WITHOU	JT ANY IN	IDUCEMENT.
PARTICIPANT'S (CHILDS) NAME		
X_ PARTICIPANT'S SIGNATURE	Age:	Date Signed:
FOR PARENTS/GUARDIANS OF P (UNDER AGE 18 AT TI		
This is to certify that I, as parent/guardian with and agree to his/her release as provided above assigns, and next of kin, I release and agree to any and all liabilities incident to my minor child as provided above, EVEN IF ARISING FROM the fullest exten	ve of all the look indemnify a d's involvem ITHE NEGI	Releases, and, for myself, my heirs, and hold harmless the Releases from nent or participation in these programs LIGENCE OF THE RELEASEES, to
X_ PARENT/GUARDIAN'S SIGNATURE		PARENT/GUARDIAN'S NAME
Date Signed:		