

BASC MEDICAL, LIABILITY, AND PHOTO WAIVER

WAIVER AND RELEASE FROM LIABILITY HEREBY RELEASES, WAIVES, DISCHARGES, AND CONVENANTS NOT TO SUE The Burlington Area Soccer Club, Inc., City of Burlington, IA, and any other municipality, or other entity in which an event or activity shall be located, their respective administrators, officers, directors, board members, representatives, agents, coaches, hosts, other participants, operators, officials, and any person involved in the club, sponsors, advertisers, owners, and lessees or premises used to conduct the event and each of them, their officers and employees, all for the purpose herein referred to as "releases", from all liability to the undersigned.

I HEREBY AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in or upon the area or in anyway competing, officiating, observing, or working for or for any purpose participating in the event and whether caused by the negligence of the releases or otherwise.

I HEREBY ASSUME FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to the negligence of releases or otherwise while in or upon the area and/or while competing, officiating, observing, or working for or for any purpose participating to this event.

EACH OF THE UNDERSIGNED expressly acknowledges and agrees that the activities at the event and in the areas are dangerous and involve the risk of serious and/or death and/or property damage. EACH OF THE UNDERSIGNED further expressly agrees that the forgoing release, waiver, indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the Providence or State in which the event is conducted and that is any portion thereof is held invalid, it is agreed that the balance shall, not withstanding, continue in full legal force an effect. In the event that I sustain injury or illness while competing, I hereby authorize any emergency first aid, medication, medical treatment or surgery deemed necessary licensed medical personnel. I also give my permission for attending medical personnel to execute on my behalf my permission forms or other necessary medical documents and to act in my behalf if I am not immediately available to do so.

UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representatives, statements or inducements part from the foregoing written agreement have been made. This waiver, release and indemnification agreement specifically embraces each and every event sanctioned, authorized, or promoted by said releases during the entire season, including, without limitation, local or regional qualifying events, wherever located, and applies to each and every event, activity hereinabove mentioned, and has the same effect as if effectively released and indemnified s to each and every event hereinabove described.

PARENT/GUARDIAN WAIVER-RELEASE

If applicant is under 18 years of age, the parent(s) or guardian(s) must execute, in addition to the above, this following waiver.

The undersigned referred to as the parent and natural guardian or legal guardian of child/children registered on this form does

thereby represent that he/she is in fact, acting in such capacity and agrees to save and hold harmless and indemnity each and all of

the parties involved with this soccer program as stated above.

Medical Waiver

PARENT/GUARDIAN SIGNATURE: _____

Date: _____

Waiver of Liability

PARENT/GUARDIAN SIGNATURE: _____

Date: _____

BASC PHOTO WAIVER

I also give permission for my child to be photographed for use without name identification on the Soccer Club's web site or other promotional materials.

PARENT/GUARDIAN SIGNATURE: _____

Date: _____