

WAIVER AND RELEASE OF LIABILITY

In consideration of the inherent risk of injury or the spread of communicable disease (i.e. COVID-19), illness, or other harm while participating in youth sports, athletics, activities, events, etc. and as consideration for the right participate, I hereby, for myself, my minor child(ren), my heirs, executors, administrators, assigns, or personal representatives, knowingly and voluntarily enter into this waiver and release of liability and hereby waive any and all rights, claims, or causes of action of any kind, whatsoever, arising out of participation, involvement, or taking-part-in youth sports, athletics, activities, etc. and do hereby release and forever discharge the City of Auburn, Nemaha County, Nebraska, Auburn City Recreation Associations and their affiliates, managers, members, agents, staff, coaches, volunteers, heirs, representatives, predecessors, successors and assigns, for any physical, psychological, or emotional injury, including but not limited to: illness, paralysis, death, dismemberment, permanent or temporary disability, damages, economical or emotional loss, that I or my child(ren) may suffer as a possible result of my or my child(ren)'s participation, involvement, or being a part of youth sports, athletics, activities, events, etc., including traveling to and from activities. I have been informed, fully recognize, and understand that I assume the risk for the welfare of myself and my child(ren)'s welfare while participating in youth sports, athletics, activities and events through, by, implemented, or in correlation with City of Auburn, NE. or the Auburn City Recreation Associations of inherent or possible injury or the spread of communicable disease (i.e. COVID-19), illness, or other harm, and the possible effects thereof (including those listed hereinabove) . If I or my child(ren) should require medical care or treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I must carry health insurance for myself and my child(ren).

I am fully aware of and will adhere to all social distancing (6 ft.+) and large group restrictions.

I have read and understand the State Governor's "Youth Sports Reopening Guidelines" and fully agree to adhere to the guidelines.

In the event that any provision contained within this Release of Liability shall be deemed to be severable or invalid the remainder of this agreement shall remain in full force and effect.

I, the undersigned participant/parent, affirm that I am of the age of 19 years or older, and that I am freely signing this agreement. I certify that I have read this entire agreement, that I fully understand its content and that this release cannot be modified orally. I am aware that this is a release of liability and a contract, and that I am signing it of my own free will.

PARENT / GUARDIAN WAIVER FOR MINORS

I hereby certify that I am the parent or guardian of _____, and do hereby give my consent without reservation to the foregoing on behalf of this individual.

Parent / Guardian Name:	_____
Relationship to Minor:	_____
Current Contact No.:	_____
Signature:	_____
Date:	_____

PARENT / GUARDIAN WAIVER FOR MINORS (2nd Child)

I hereby certify that I am the parent or guardian of _____,
named above, and do hereby give my consent without reservation to the foregoing on behalf of
this individual.

Parent / Guardian Name:	
Relationship to Minor:	
Signature:	
Date:	

PARENT / GUARDIAN WAIVER FOR MINORS (3rd Child)

I hereby certify that I am the parent or guardian of _____,
named above, and do hereby give my consent without reservation to the foregoing on behalf of
this individual.

Parent / Guardian Name:	
Relationship to Minor:	
Signature:	
Date:	

PARENT / GUARDIAN WAIVER FOR MINORS (4th Child)

I hereby certify that I am the parent or guardian of _____,
named above, and do hereby give my consent without reservation to the foregoing on behalf of
this individual.

Parent / Guardian Name:	
Relationship to Minor:	
Signature:	
Date:	