

# LIABILITY WAIVERS AND MEDICAL RELEASE FORM

## 2024 Dublin Charity Cup Soccer

**Team Name:** \_\_\_\_\_ **Age Group/Gender:** \_\_\_\_\_

In consideration of the furtherance of your purposes, objectives and aims, and of your permitting me to participate in your tournament, on behalf of myself, my heirs, executors, administrators and assigns, I hereby waive and release and forever discharge all rights and claims for damages and/or otherwise indemnify the Dublin Charity Cup, Inc., the Dublin Soccer League, Inc., the City of Dublin, Ohio, as well as any other person, sponsor, employees, board members, agents, associated personnel, organization or corporation, their heirs, executors, administrators, and assigns who are providing services or assistance as a result thereof against any claim by myself, or on behalf of the registrant, siblings or wards as a result of the registrant's participation in the Dublin Charity Cup. In my absence, I hereby give consent for emergency medical transport and care as prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry and agree to be responsible for all associated costs. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent. By participating in this tournament, the Dublin Charity Cup may use photos or videos taken of games and surrounding activities for publicity purposes.

### RELEASE, WAIVER OF LIABILITY, ASSUMPTION OF RISKS and INDEMNITY/HOLD HARMLESS AGREEMENT for PARTICIPATION IN DUBLIN SOCCER LEAGUE EVENTS/ACTIVITIES

For and in consideration for participation in Dublin Soccer League ("DSL") sponsored events and activities including those taking place on City of Dublin ("City" or "Dublin") facilities, the undersigned Users (defined to mean each signatory to this document and each signatory's minors, heirs, successors, representatives and assigns) hereby waive, release, and/or relinquish any and all claims, rights, and causes of action against DSL and the City of Dublin ("Dublin" or "City") including, but not limited to, claims or causes of action for personal injury or illness, property damage, wrongful death, and/or exposure to or infection by any Naturally Occurring Disease, defined to include any disease, illness, or infection caused by bacteria, viruses, rickettsia, fungi, and parasites, arising out of Users participation in DSL sponsored events/activities and for events held on City facilities, wherever or however they occur, and for such period said activities or use may occur. Users specifically acknowledge that they are voluntarily participating in the DSL sponsored events/activities and are voluntarily using the City's facilities and specifically assume all risks associated with that use, event, or activity.

Users understand that gathering in groups of people in close quarters may cause exposure to or infection by any Naturally Occurring Disease, including the novel coronavirus, COVID-19. COVID-19 has been declared a worldwide pandemic by the World Health Organization, is extremely contagious, and is believed to spread mainly from person-to-person and person-to-object-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited or limited the congregation of groups of people.

Users expressly acknowledge that DSL and the City of Dublin (both hereby defined to include all employees, managers, agents, elected officials, volunteers, representatives, and their insurers) cannot guarantee that User will not become infected with any Naturally Occurring Disease, including COVID-19 through participation in DSL sponsored events/activities or through the use of City facilities. Further, Users understand that participating in DSL events/activities and using City facilities could increase the risk of contracting a Naturally Occurring Disease.

The undersigned Users hereby agree as follows:

USER AGREES TO INDEMNIFY AND HOLD DUBLIN SOCCER LEAGUE AND THE CITY OF DUBLIN HARMLESS FROM LIABILITY OR CLAIMS, DEMANDS, DAMAGES AND COSTS FOR OR ARISING OUT OF ANY DAMAGE, INJURY, DISEASE, SICKNESS OR DEATH TO USERS, OR THEIR MINORS, OR INVITEES RELATING TO THE USE OR OPERATION OF CITY FACILITIES OR PARTICIPATION IN DUBLIN SOCCER LEAGUE EVENTS/ACTIVITIES. THE UNDERSIGNED USER UNDERSTANDS, ACKNOWLEDGES, AND STIPULATES THAT THIS INDEMNITY AGREEMENT INCLUDES ANY SUCH CLAIMS, DEMANDS AND COSTS ARISING OUT OF NEGLIGENCE ON THE PART OF THE RELEASED PARTIES.

User stipulates and agrees that invalidation of any term(s) or provision(s) of this Agreement by judgment or other court order shall not affect any of the other terms or provisions and such other terms and provisions shall remain in full force and effect.

User acknowledges that he/she understands and has read each of the above paragraphs, that User is fully advised of the potential dangers of participating in DSL events and visiting City facilities, that User is signing this document voluntarily and with full knowledge of his/her actions, and that User, or User's parents/guardians, have all legal authority to sign this Waiver and Release.

I HAVE CAREFULLY READ THE FOREGOING AGREEMENT, UNDERSTAND ITS CONTENTS, AND AM AWARE THAT I AM RELEASING CERTAIN LEGAL RIGHTS. I ACKNOWLEDGE THAT I AM SOLELY RESPONSIBLE FOR ANY INJURIES, ILLNESS, OR DEATH INCURRED WHILE USING CITY FACILITIES AND PARTICIPATING IN DUBLIN SOCCER LEAGUE SPONSORED EVENTS/ACTIVITIES.

**SIGNATURE REQUIRED ON PAGE 2**

# LIABILITY WAIVERS AND MEDICAL RELEASE FORM

## 2024 Dublin Charity Cup Soccer

Team Name: \_\_\_\_\_ Age Group/Gender: \_\_\_\_\_

THIS IS THE SIGNATURE PAGE ACCOMPANYING THE WAIVER RELEASE ON PAGE 1

**Players must have the release form signed by a parent or legal guardian.**

Player's Printed Name	Date of Birth	Parent/Guardian Signature	Date Signed
1. _____	___/___/___	_____	_____
2. _____	___/___/___	_____	_____
3. _____	___/___/___	_____	_____
4. _____	___/___/___	_____	_____
5. _____	___/___/___	_____	_____
6. _____	___/___/___	_____	_____
7. _____	___/___/___	_____	_____
8. _____	___/___/___	_____	_____
9. _____	___/___/___	_____	_____
10. _____	___/___/___	_____	_____
11. _____	___/___/___	_____	_____
12. _____	___/___/___	_____	_____
13. _____	___/___/___	_____	_____
14. _____	___/___/___	_____	_____
15. _____	___/___/___	_____	_____
16. _____	___/___/___	_____	_____
17. _____	___/___/___	_____	_____
18. _____	___/___/___	_____	_____