

## COMMUNICABLE DISEASE RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

5/18/20

Participant's NameBirthdate		e
Street Address	City	Zip
Parent/Guardian's Name	Emergency	y Phone ()
Parent/Guardian's Name	Emergency	/ Phone ()
In consideration of being allowed to participate in undersigned, acknowledge, appreciate, and agree the		ed events and activities, I the
I am aware there are risks to me of exposure to direct an outbreak of any and all communicable disease, syndrome coronavirus 2 (SARS-CoV-2)", which is mutation or variation thereof.	including but not limited to, the	virus "severe acute respiratory
I, for myself and on behalf of my heirs, assigns, particles in the interest of the interest of the interest of the interest of the fullest extent permitted by law.	ols YOUTH SOCCER ASSOCIAT ts and/or employees, associated d lessors of premises used to con y arising out of or related to any IL	rion, its MEMBER LEAGUES personnel, other participants, induct the event (RELEASEES), LNESS, INJURY, DISABILITY
I HAVE READ THIS RELEASE OF LIABILITY AND ITS TERMS, UNDERSTAND THAT I HAVE GIVE FREELY AND VOLUNTARILY WITHOUT ANY IND	N UP SUBSTANTIAL RIGHTS B	•
X		
X Signature of Participant aged 18 or older	Age	Date
FOR PARENTS/GUARDIANS OF PARTICIPANT U	NDER AGE 18 (MINOR) AT TIME	OF REGISTRATION
This is to certify that I, as parent/guardian with legal release as provided above of all the Releasees, and, to indemnify and hold harmless the Releasees from participation in these programs as provided abo RELEASEES, to the fullest extent permitted by law.	for myself, my heirs, assigns, and any and all liability incidents to n	next of kin, I release and agree ny minor child's involvement or
X	<del></del>	
Signature of Parent/Guardian for Participant under a	ge 18 [	Date
X		<del></del>
Signature of Parent/Guardian for Participant under a	ge 18 [	Date