Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and is believed to spread mainly from person-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 the congregation of groups of people.

_______ ("the ORGANIZATION") has put in place preventative measures to reduce the spread of COVID-19; however, the ORGANIZATION cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending the ORGANIZATION practices, games, or events could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending the practice, games, or events of the **ORGANIZATION** and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the practice, game or events of the **ORGANIZATION** may result from the actions, omissions, or negligence of myself and others, including, but not limited to, **ORGANIZATION** employees, volunteers, coaches, spectators, participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at the practice, games, events or participation in, of the **ORGANIZATION** ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the **ORGANIZATION** its employees, agents, representatives, The Real Select Football League, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the **ORGANIZATION**, its employees, agents, volunteers, representatives, The Real Select Football League, whether a COVID-19 infection occurs before, during, or after participation in any **ORGANIZATION** practice, game, or event, as a Player, Coach, Volunteer, Referee, Security, or Spectator(s).

I further agree to, that I and my child will follow and abide by the preventive measures put in place by the **ORGANIZATION** to reduce the spread of COVID-19.

Signature of Parent/Legal Guardian	Date	
Printed Name of Parent/Legal Guardian		

Participant Name (and last 4 number of SSN)

PARENT/LEGAL GUARDIAN MUST READ AND FULLY UNDERSTAND BEFORE SIGN (Right thumb Print Required)