

Team Waiver and Roster for the Resolute Athletic Complex/ 3599 Chiller Lane/Columbus, OH 43219

Team Name: \_\_\_\_\_ Date: \_\_\_\_\_

In consideration of being permitted to participate in any way in any sports activity ("Activity") I, for myself for personal representatives, assigns, heirs, and next of kin.

1. ACKNOWLEDGE, agree, and represent that I understand the nature of the sports activity that I am participating in and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. 2. FULLY UNDERSTAND THAT: a)SPORTS ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these risks and dangers may be caused by my own actions or inactions, the action or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; there may be OTHER RISK AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity. 3. HEREBY RELEASE, DISCHARGE AND COVENANT NOT TO SUE RESOLUTE ATHLETIC COMPLEX, LLC their respective administrators, directors, agents, officers, members, volunteers, other participants, any sponsors, advertisers, and, if applicable, owner and lessors of the premises on which the Activity takes place, (each considered one of the "releasees" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES"OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY agreement I , or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS, LIABILITY, DAMAGE, OR COST WHICH MAY INCUR AS THE RESULT OF SUCH CLAIM. 4. CONSENTS TO THE ADMINISTRATION OF FIRST-AID AND DOCTOR'S CARE OR ANY FORM OF MEDICAL TREATMENT necessitated by illness or injury that may require the same while under the supervision and guidance of RESOLUTE ATHLETIC COMPLEX, LLC and their respected staff members. In the event of the necessity of such care and treatment as hereto described, I AGREE TO HOLD HARMLESS AND INDEMNIFY RESOLUTE ATHLETIC COMPLEX, LLC their respective members, employees, volunteers and other participants and if applicable, owner and lessors of premises from any acts of malefeasance, and or failure to act on the part of those chosen to administer medical care on the behalf of the participant. I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Player's Name	Parent's Signature	Phone	Email address
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