

Parent/Guardian COVID-19 Release of Liability Statement

Guest and Player's Release of Liability due to COVID-19 and Participation

This document is to make known that all guests ('participants', 'athletes', 'players') are participating voluntarily in SA Xtreme Volleyball (SA Xtreme) events. Participants and guests are aware and made known that dangerous conditions, risks and hazards do exist at Limitless Sports Academy (LSA) due to the recent COVID-19 pandemic. Participants and guests also acknowledge the risks of playing indoor volleyball and coming into contact with other participants, volleyballs and training equipment that might be at this location can present a hazard and risk and can result in injury or illness. I understand that SA Xtreme and the LSA practice facility do not provide medical insurance for my child.

I am aware and will follow all of the Clinics protocols & policies and I understand that by signing this waiver, I acknowledge that until COVID-19 is either eradicated, a vaccine is developed, or a cure is found, there is no way to completely eliminate the risk of infection. I also understand that SA Xtreme Volleyball Club will take all necessary precautions to prevent injury and the spread of the Coronavirus, and that any expenses incurred for medical attention required by my child for an injury or an infection while participating at in SA Xtreme Volleyball training sessions or events will be my sole responsibility.

RELEASE OF LIABILITY AGREEMENT:

I have read and understand the *Parent/Guardian COVID-19 Release of Liability Statement* and agree to its contents. The SA Xtreme Volleyball Club (SA Xtreme), facility (Limitless Sports Academy), its owners and/or their staff are not responsible for any injuries which may occur to athletes. All participants are asked to be on their best behavior, follow all gym rules and be respectful to coaches, staff and other participants. Parents and/or Guardians are responsible for all medical attention which may be needed in case of injury and hereby release SA Xtreme and LSA from any and all responsibility.

Parent/Guardian Name (please print clearly): _____

Signature of Parent/Guardian: _____ Date: _____

Parent/Guardian Email: _____

Participant Name(s): _____ Participant Age(s): _____

