ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

For and in consideration of my application and as a condition of permitting me to participate in the Catawba Valley Youth Soccer Association (CVYSA) Adult League, I hereby take action for myself, my executors, personal representatives, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I certify that I am physically fit, have sufficiently prepared or trained for participation in this activity, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity. Further, I hereby acknowledge and assume the risks and dangers in participating in such soccer activities.

(B) I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity.

(C) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, costs, damages and claims, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this activity, THE FOLLOWING ENTITIES OR PERSONS (the "Releasess"): Catawba Valley Youth Soccer Association (CVYSA), Catawba Valley Adult Soccer League and/or their respective directors, officers, employees, volunteers, representatives, contractors and agents, and the activity holders, sponsors, and volunteers;
(D) I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in the above paragraph (C) and all other references of such entities or persons herein from and against any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise. I acknowledge that CVYSA and their directors, officers, volunteers, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

(E) I HEARBY RELEASE, DISCHARGE AND COVENANT NOT TO SUE Catawba Valley Youth Soccer Association (CVYSA) Adult League, their respective administrators, directors, agents, officers, members, volunteers and employees, other participants, any sponsors, advertisers and, if applicable, owner and lessors of premises on which the Activity takes place. I HEARBY RELEASE CVYSA Adult League FROM ALL LIABILITY DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR PART BY THE NEGIGENCE OF THE "RELEASEES" OR OTHERWISE INCLUDING NEGLIGENT RESCUE OPERATIONS AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OFLIABILITY 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 RELEASES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as the result of such claim.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns. The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT, AND I SIGN IT OF MY OWN FREE WILL.