## School of St. Mary Athletics Waiver

Consent, Assumption of Risk, Release of Minor Participant, Parent Responsibility and Conduct, Medical Authorization & Medical Insurance Statement

I, the parent or legal guardian of \_\_\_\_\_\_ consent to allow this minor individual to participate in School of St. Mary Athletic programs ("SMS Athletics"). I have read and understand the Consent, Assumption of Risk, Release of Minor Participant, Parent Responsibility and Conduct, Medical Authorization and Medical Insurance Statement and Intend to and by signing bind myself, my spouse, the minor's heirs, successors, executors, estate and dependents to the terms, hereof.

I will advise the minor that he or she must inspect the playing field or facility to be used for athletic contests, practices, preparation or other SMS Athletic purposes and if the minor believes anything to be unsafe, the minor shall immediately advise the coach or program supervisor present and refuse to participate further.

I agree that I will advise the minor of all safety procedures in using the equipment and playing facilities and will instruct the minor to follow them.

I will not advise the minor to attempt any skill level of training or any other activity of which the minor is not fully capable. I realize that the study and play of such sports as (but not limited to) Football, Volleyball, Cheerleading, Basketball, Track, Lacrosse, and Golf require proper conditioning and training.

I understand that sports activities are an education system. I agree that the minor will strictly abide by the training rules of SMS Athletics and will follow explicitly all instructions given by the coaches or instructors during the course of the minor's training. I will advise the minor to watch out for others in the course of the minor's training and to follow all the rules explained to him or her or otherwise posted.

I agree that I will not interfere with the coaching instruction given at any SMS Athletics activity unless it constitutes a violation of the law. I agree to be respectful of all coaches, instructors, participants, officials, representatives, agents and employees of SMS Athletics I understand I can be removed and/or barred from any or all SMS Athletic activities by any SMS coach, instructor, official, representative, agent or employee if my behavior is considered disruptive.

I hereby consent to and authorize SMS Athletic coaches, instructors, officials, representatives, agents, or employees to secure emergency medical treatment for the minor if injured while preparing for traveling to/from or participating in SMS Athletic activities.

I understand and consent that it is my responsibility to purchase and maintain medical insurance coverage for the minor during any and all participation in SMS Athletics. I understand that SMS Athletics does not provide medical insurance coverage for any participants, spectators, or any other party affiliated with SMS Athletics.

I full understand that:

- A. There are risks and dangers associated with participation in sports such as (but not limited to) Football, Volleyball, Cheerleading, Basketball, Track, Lacrosse, and Golf. There are risks such as, but not limited to, bodily injury, communicable diseases, partial or total disability, paralysis and death. In accordance with the law, SMS Athletics does not exclude individuals with medical conditions that do not pose a medically recognized threat to the health or safely of other participants in the normal course of play. I understand that there is some unavoidable circumstances where these conditions may require special caution on the minor's part to minimize the danger to the minor or others, and I acknowledge that it is the minor's responsibility to act accordingly.
- B. There are social and economic losses and damages which could result from those risks and dangers described above which could be severe.
  C. There are other risks not known or foreseeable at the time that could arise.

## I EXPRESSLY AND VOLUNTARILY ASSUME ALL RISKS TO THE MINOR OF DEATH, ILLNESS OR INJURY SUSTAINED WHILE PREPARING FOR PARTICIPATING IN OBSERVING OR TRAVELING TO /FROM SMS ATHLETIC ACTIVITIES WHETHER OR NOT CAUSED BY NEGLIGENCE OF THE RELEASED PARTIES HEREIN.

I accept and assume all risks and responsibilities for all losses and damages following an injury, illness, disability, paralysis, or death, however caused or alleged to be caused, including injuries caused in the whole or in part by the negligence of SMS Athletics, it's representatives, agents, employees, instructors, participants, or officials.

I release SMS Athletics, The School of St. Mary, St. Mary's Roman Catholic Parish, The Archdiocese of Chicago and its' instructors, coaches, representatives, agents, employees, and all individuals associated SMS Athletics including all officials of the Roman Catholic Church (herein after referred to as the "Released Parties") of and from any and all liability, claims, demands or actions whatsoever arising out of any damage, loss or injury to the minor while participating in SMS Athletics or any other related activity of SMS Athletics, whether such loss, damage or injury results from negligence or otherwise.

I agree this release covers each and every time the minor plays, prepares for, travels to/from or otherwise participates in any activity, listed or unlisted of SMS Athletics, held at any field or facility or any location sponsored by SMS Athletics and/or its' agents, representatives, instructors or coaches.

I agree that I will not sue or make claims against any of the Released Parties as a result of the minor's participation in SMS Athletics at The School of St. Mary or any other locations where participation takes place. I agree to indemnify and hold harmless the Released Parties from all claims, judgments and costs including attorney's fees incurred in connection with and any such action brought as a result of the minor's participation in any SMS Athletics activity.

In signing this release, I am stating that I understand my actions, and that I take responsibility for the minor's acts, that I have read carefully and understand this release and fully agree with each statement contained herein and that I am responsible for the minor, I am aware I have the release reviewed by legal counsel.

If any portion of this release shall be held invalid, illegal or unenforceable to any extent and for any reason by any court of competent jurisdiction, the remainder of this release shall not be affected thereby and shall be enforceable to the full extent permitted by law. I sign this release on behalf of myself, my spouse, and my minor's heirs, successors, executors, estate and dependents. I hereby acknowledge that I amk an adult, 18 years or older.

Parent or Guardian's Signature

Date

Address of Participant (s)