

Waiver Form and Release of Liability for SSA Athletics

DISCLAIMER: SSA Athletics is not responsible for any injury (or loss of property) to any person suffered while participating or in any other way involved in the 2017 football season for any reason whatsoever, including ordinary negligence on the part of SSA Athletics, its agents or employees.

In consideration of my participation, I hereby release and covenant not to sue SSA Athletics, Board of Education, and any of employee, instructor, or agent/assignee of any of the above three named agencies from any and all present and future claims resulting from ordinary negligence on the part of SSA Athletics, or others listed for property damage, personal injury or wrongful death, arising as a result of my engaging in or receiving instruction while participating in the 2017 football season activities incidental thereto, wherever, whenever or however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future, that may be made by me, my family estate, heirs, or assignees.

Further, I understand that football & cheerleading are vigorous team sports involving severe cardiovascular stress and physical contact. I understand that football & cheerleading involve certain risks, including but not limited to, death, serious neck and spinal injuries resulting in complete or partial paralysis, brain damage and serious injury to all bones, joints, muscles and internal organs. I further understand that football & cheerleading involve a high risk of knee and ankle injuries. In addition, I understand that participation in the 2017 football season involves activities incidental thereto, including but not limited to, travel to and from the site of the activity, participation at sites that may be remote from available medical assistance and the possible reckless conduct of other participants. I am voluntarily participating in this activity with knowledge of the danger involved and hereby agree to accept any and all inherent risks of property damage, personal injury or death.

I further agree to indemnify and hold harmless SSA Athletics and others listed for any and all claims arising as a result of my engaging in or participating in the "2017 SSA Postgraduate program Season" activities incidental thereto, wherever, whenever or however the same may occur.

I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of North Carolina, and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceeding shall be in North Carolina.

I affirm that I am of legal age and am freely signing this agreement. I have read this form and fully understand that by signing this form, I am giving up legal rights and/or remedies which may be available to me for ordinary negligence of SSA Athletics or any of the parties listed above.

In case of a medical emergency arises while participating in the programs, permission is given for staff personnel, including coaches or their designates to seek medical help. Permission is given to physicians to perform needed treatment. The department agrees to contact you as soon as possible, if the medical emergency involves your minor child. If we cannot contact you, we should contact

_____ at _____ (phone number).

**Parent or Legal Guardian's
Signature** _____

Date _____