

-Please complete one per family

Carolina Homeschool Cougars Volleyball / Southside Baptist Church Liability Waiver

Participating athlete(s) first and last name: _____

By signing this document you will waive certain legal rights, including the right to sue Carolina Homeschool Consortium and/or Southside Baptist Church.

I/We are aware of the usual dangers and risks inherent in participating in volleyball for the Carolina Homeschool Cougars/Southside Baptist Church. By signing this waiver, the participant freely accepts and fully assumes responsibility for all such dangers and risks and the responsibility of personal injury, death, property damage or loss resulting therefrom. I/We hereby agree as follows:

1. To waive any and all claims for personal injury including death, illness, and/or property damage that I/we may have against Carolina Homeschool Cougars Volleyball/Southside Baptist Church, their shareholders, partners, principals, directors, officers, sponsors, affiliates, employees, contractors, representatives, staff, and any volunteers in any way associated with, Carolina Homeschool Cougars Volleyball/ Southside Baptist Church, all of whom are hereinafter collectively referred to as “the Releasees.”
2. To release the Releasees from any and all liability for any loss, damage, injury, death, medical and/or other expense that I/we may suffer and/or that any other party may suffer as a result of my participation and/or any other activities due to any cause whatsoever.
3. To hold harmless and indemnify the Releasees from any and all liability for any property damage or personal injury to any third party, resulting from my/team’s participation in volleyball and/or other volleyball activities.
4. This release of liability shall be effective and binding upon my heirs, next of kin, executors, administrators, successors, and assigns in the event of my personal injury including death, illness, and/or property damage.
5. I/We additionally agree not to take unreasonable risks while participating in the volleyball program including but not limited to attempting skills and conditioning levels that I am not qualified to perform safely or causing any other participants/spectators’ unreasonable risk of harm.
6. I/We understand that participation in Volleyball is voluntary and not a requirement in any way. I/We hereby certify that the participating volleyball athlete is covered by their own Medical Insurance, and that I/we have read and understand this Release of Liability prior to signing it, and I/we am aware that by signing this Release of Liability I/we am waiving certain legal rights which I/we or my heirs, next of kin, executors, administrators, successors, and assigns may have against the Releasees. Carolina Homeschool Cougars Volleyball/Southside Baptist Church shall have the right to impose any additional conditions which, in the opinion of the Releasees, will further the intent and legal rights and waivers provided herein. This liability waiver was made and executed in the State of South Carolina and shall be governed by, enforced in and construed in accordance with the laws of the State of South Carolina/ I/We acknowledge that in exercising this waiver I/we are not relying on any inducements, promises, or representations made by the Releasees. I/We are acting on behalf of the volleyball athlete’s other parent in signing this contract and I/we have the authority to bind such other parent to the terms and conditions of this contract on his/her behalf.

Relationship to athlete: _____

Signature of Parent/Guardian

Date: _____