



Participation Waiver Form

Please read the following carefully:

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I hereby agree to all the terms herein. I plan to participate in the Sharks Youth Football League with the Jacksonville Sharks, member team of the National Arena League. I understand that my **participation in any activity with the Sharks Youth Football League involves a risk of personal injury to others and myself.** My voluntarily participating in the Activity with knowledge of the possible danger involved and hereby **voluntarily assume and accept any and all inherent risks of injury or death to myself or to any other person which may result from my participation in the Activity,** regardless of how such injury or death may arise and regardless of who is at fault. I understand and agree that, by signing this Waiver, General Release of Claims, and Covenant Not to Sue (this "Release"), I am releasing and discharging the Jacksonville Sharks and the City of Jacksonville and each of their respective direct and indirect owners, officers, agents, directors, employees, partners, representatives, attorneys and any and all of their respective subsidiaries or affiliates (collectively the "Releases"), from any and all claims, demands, or causes of action which here in after may accrue against them and which in any way arises as a result of my participation in the Activity and further that the Releases are not responsible for damage or destruction of property from any cause. I understand and agree that the Activity has inherent risks and dangers that no amount of care, caution or expertise can eliminate, including, without limitation, the **potential for serious bodily injury, permanent disability, paralysis, and loss of life.** These inherent risks and dangers may result not only from my actions, inactions, or negligence of others, including other participants, the condition of the premises, or the condition of any equipment used. I understand and acknowledge that there may be other inherent risks not reasonably known at the time. I do hereby acknowledge that I may be photographed, videotaped. I grant full permission to the Sharks Youth Football League and the Jacksonville Sharks, whether known or here in after developed to exhibit, record, reproduce, broadcast, transmit, publish, sell, distribute, perform, use and re-use, and to license others to exhibit, record, reproduce, broadcast, transmit, publish, sell, distribute, perform, use and re-use, for any purpose, in any manner, without any father notification, authorization, compensation to me, or anyone on my behalf, my name and likeness, any photographs, video, motion pictures, recordings or other record (individually or collectively "Recordings") of the Activity (or any part or parts of my participation) in any and all media, where now known or hereafter developed, worldwide and in perpetuity, and I represent and warrant that no further permission is required for the Releases to use the recordings as provided herein.

I further agree that in the event of a dispute between me and any of the releases arising out of or related to the Activity or this Release, I agree that such dispute will be settled by arbitration administered by the American Arbitration Association under its Commercial Arbitration Rules (but not its Procedures for Large, Complex Commercial Disputes). The hearing will take place in Jacksonville, Florida unless both parties' consent to a different location, before a panel of three (3) arbitrators. One (1) arbitrator will be selected by me, one (1) arbitrator will be selected by the Releases, and the third arbitrator will be selected by the other two (2). The decision or award of the arbitrators will be the final and binding upon all parties and may be entered in any court of competent jurisdiction.

COVID-19 WARNING: An inherent risk of exposure to Covid-19 exists in any public place where people are present. Covid19 is an extremely contagious disease that can lead to severe illness and death. According to the centers for disease control and prevention, senior citizens and guests with underlying medical conditions are especially vulnerable. By visiting Columbus Civic Center arena you voluntarily assume all risks related to any exposure or after effects to Covid-19

I have read this Release carefully and fully understand its contents. I am aware that this is an agreement not to sue the Releases and constitute a complete release of liability by me in favor of the Releases. I acknowledge that I am signing this

Release of my own free will. By signing, I warrant that I am the parent/guardian of listed child, not under any legal disability, and that I have full authority to execute this Release and do so with full knowledge of the facts and circumstances surrounding the performance and the rights that I am granting herein.

Sign your name, signature, and add the date to complete this waiver.

Print Full Name

Date

Signature