

Colorado Adult Soccer Association / USSSA

YOUTH ELIGIBILITY FORM and WAIVER

I certify that I am under eighteen years of age and wish to participate on a Colorado Adult Soccer Association adult team. I have read and understand the CASA Player Responsibility and Waiver of Liability and agree to its terms.

NAME: _____

ADDRESS: _____

BIRTHDATE: _____ AGE: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

TEAM: _____ LEAGUE: _____ YEAR: _____

SIGNATURE OF
PLAYER: _____ DATE: _____

PARENT CONSENT RELEASE & WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT IN CONSIDERATION of my minor child being permitted to participate in any way in COLORADO ADULT SOCCER ASSOCIATION / USSSA Sanctioned Events. I agree:

1. I understand the nature of Soccer Activities and the Minor's Experience and capabilities and believe the Minor to be qualified, in good health and in proper physical condition to participate in such Activity. I further agree that I will instruct the Minor that if any time the Minor believes conditions to be unsafe, he/she will immediately discontinue further participation in the Activity.

2. FULLY UNDERTAND that (a) SOCCER ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT PARALYSIS, AND DEATH; (b) these risks and dangers may be caused by the Minor's own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at the time, and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS KNOWN AND UNKNOWN AND ASSUME RESPONSIBILITY FOR LOSSES, COSTS AND/OR DAMAGES FOLLOWING SUCH INJURY, DISABILITY, PARALYSIS, OR DEATH, EVEN IF CAUSED, IN WHOLE OR PART , BY THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW incurred as a result of the Minor's participation in the Activity.

3. HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS Colorado Adult Soccer Association, and United States Specialty Sports Association (USSSA), their respective leagues, administrators, directors, agents officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANY ONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM

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ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS A RESULT OF SUCH CLAIM. I HAVE READ THIS AGREEMENT, FULLY AND UNDERSTAND ITS TERMS, UNDERSTAND THAT I AND THE MINOR HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY THE LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

I am the parent or guardian of the above named player and hereby grant my permission for him/her to play on the CASA team named above. I have read and understand the CASA / USSSA Player Responsibility and Release Form and agree to its terms.

SIGNATURE: _____

DATE: _____

TELEPHONE:(H)or (C)_____ (W)_____