



**WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19
PLEASE REVIEW DOCUMENT IN ITS ENTIRTY**

In consideration of being allowed to participate on behalf of any activity and related events associated with SALINAS STORM GIRLS FASTPITCH INC., the undersigned acknowledges, consents to, and agrees that:

1. Participation in athletic activities includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. The risk to have direct or indirect contact with individuals who have been exposed to and/ or diagnosed with one or more communicate disease, including but not limited to COVID-19 while participating in SALINAS STORM activities does exist. While certain guidelines, practices, and personal discipline may reduce this risk, the risk of serious illness and /or death through participation is real and does exist;
2. I agree to keep myself up to date and comply with the state, county, facilities and Salinas Storm customary terms and policies established and conditions for participation regarding protection against infectious diseases.
3. If I observe any unusual or significant hazard or unusual condition during my presence or participation in Salinas Storm activities or common areas associated with the Salinas Storm Sports Complex, included and not limited to parking lot areas, Storm House, Homers Batting Cages, and community restrooms. I will remove myself from participation and bring such to the attention of my coach or the nearest authority figure associate with SALINAS STORM GIRLS FASTPITCH INC.
4. I KNOWINGLY AND FREEY ASSUME ALL SUCH RISKS, both known and unknow, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELESEES OR OTHERS, AND ASSUME FULL RESPONSIBILITY FOR MY PARTICIPATION. I acknowledge that the only way to completely reduce the risk of injury from participation in athletics is to remove myself from the activity and not participate.
5. I understand and willing comply that if I have had possible and or confirmed contact or exposure to illness from infectious diseases including COVID-19, I will immediately inform my head coach and Salinas Storm Organization. I will not be allowed to return to any Salinas Storm activities until cleared by a licensed medical physician/Monterey County Health Department and/or two week self-quarantine from initial time of exposure.
6. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS SALINAS STORM GIRLS FASTPITCH INC, and/or employees, other participants, coaches, volunteers, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND UNDERSTAND RISKS I AM UNDERTAKING BY SIGNING IT.

I SIGN FREELY, VOLUNTARILY, WITHOUT INDUCEMENT, DURESS AND WITH FULL UNDERSTANDING.

Printed Name of Participant: _____

Participant Signature: _____ Date signed: _____

FOR MINOR CHILDREN WHO ARE UNDER 18 AT THE TIME OF EXECUTION.

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities that include the possibility of becoming seriously ill or even dying. I agree after careful thought and consideration to assume the risk on behalf of my minor child. I, for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of Parent/Guardian: _____

Parent Guardian/signature: _____ Date signed: _____