

## COMMUNICABLE DISEASE RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

5/18/20

Participant's Name	Birthdate		
Street Address	City		Zip
Parent/Guardian's Name	Emerç	gency Phone (_	)
Parent/Guardian's Name	Emerç	gency Phone (	)
In consideration of being allowed to participa undersigned, acknowledge, appreciate, and agr		elated events	and activities, I the
I am aware there are risks to me of exposure to an outbreak of any and all communicable dise syndrome coronavirus 2 (SARS-CoV-2)", whice mutation or variation thereof.	ease, including but not limited to,	the virus "seve	ere acute respiratory
I, for myself and on behalf of my heirs, assig INDEMNIFY, AND HOLD HARMLESS THE IL AND CLUBS, its directors, officers, officials, sponsors, advertisers, and, if applicable, owner from any and all claims, demands, losses, and li OR DEATH I may suffer, WHETHER ARISING to the fullest extent permitted by law.	LINOIS YOUTH SOCCER ASSOCIATION AND ASSOCIATION AND ASSOCIATION AND ASSOCIATION AND ASSOCIATION AND ASSOCIATION AND ASSOCIATION ASSOCIATIO	CIATION, its I iated personned to conduct the e ny ILLNESS, II	MEMBER LEAGUES el, other participants, event (RELEASEES), NJURY, DISABILITY
I HAVE READ THIS RELEASE OF LIABILITY A ITS TERMS, UNDERSTAND THAT I HAVE G FREELY AND VOLUNTARILY WITHOUT ANY	SIVEN UP SUBSTANTIAL RIGHT		
XSignature of Participant aged 18 or older		Age	 Date
FOR PARENTS/GUARDIANS OF PARTICIPA			<u>ISTRATION</u>
This is to certify that I, as parent/guardian with I release as provided above of all the Releasees, to indemnify and hold harmless the Releasees participation in these programs as provided RELEASEES, to the fullest extent permitted by	and, for myself, my heirs, assigns, from any and all liability incidents above, EVEN IF ARISING FRO	and next of kir to my minor o	n, I release and agree child's involvement or
X		Date	
Signature of Parent/Guardian for Participant und	der age 18	Date	
XSignature of Parent/Guardian for Participant unc	der age 18	Date	
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