Farmer Jim's Sports Complex - Indoor Soccer

OFFICIALS WAIVER AND RELEASE OF LIABILITY

READ BEFORE SIGNING

Date Signed

In consideration to officiating indoor soccer or being allowed to participate in any way at **Britain's Game**, **LLC**, **dba Farmer Jim's Sports** athletic sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

- 1. That when I am engaged as a soccer official at Farmer Jim's Sports, I am an independent contractor and not an employee of the facility, and agree to accept the game fees established by the facility for my services. I understand it is my responsibility to report the income generated from the officiating activity to the tax authorities since the facility is not involved in collecting and keeping track of the fees paid; and
- Participation in such events or activities involves the possible exposure to and illness from infectious and/or communicable diseases including, but not limited to, COVID-19, MRSA, influenza, and other infectious or communicable diseases. While adherence to particular rules and requirements may reduce the risk of possible exposure, the risk of serious illness and death remains; and
- 3. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and
- 4. I EXPRESSLY ASSUME ALL RISKS FOR MY HEALTH AND WELL-BEING AND EXPRESSLY ASSUME ALL RISKS associated with participating in any activities offered at Farmer Jim's Sports, including, but not limited to the negligence of Britain's Game, LLC, dba Farmer Jim's Sports and any other organization participating or involved in providing or promoting any functions or activities or access to the facilities. I also hereby release, waive, discharge and covenant not to sue Britain's Game, LLC, dba Farmer Jim's Sports, or any sponsoring organization, and any other organization providing, promoting or preventing access to functions, programs, or other activities (including, without limitation, the owners, members, officers, directors, employees, and representatives of any of the foregoing) at any time hereafter, from any and all demands, liabilities, losses, or damages, (including death or damage to property) caused or alleged to be caused in whole or in part, by the negligence of any of the foregoing people or entities.
- 5. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and
- 6. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, DISCHARGE, AND HOLD HARMLESS **Britain's Game, LLC, dba Farmer Jim's Sports** their members, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, referees, and in RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. I expressly agree that this release is intended to be as broad and inclusive as permitted by the laws of the State of Ohio and that if any portion of this release is determined to be invalid, it is agreed that the remaining provisions of this release shall continue in full force and effect; and
- 7. I further agree that I will not sue or make a claim against the Released Parties for damages or other losses sustained as a result of my participation in the activities of any kind. I also agree to INDEMNIFY AND HOLD THE RELEASED PARTIES HARMLESS from any claims, judgment and costs, including attorney and legal fees, incurred in connection with any action brought as a result of my participation in the activities of any kind.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS,

UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARYILY WITHOUT INDUCEMENT Official's Name (Please Print) Official's Home Address (City, State, Zip) Official's Signature Date Signed Phone Number E-Mail Address Emergency Contact & Phone Number Name of Person to contact (Please Print) Phone Number FOR OFFICIALS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION) This is to certify that I, as a parent/guardian with legal responsibility for this official, do consent and agree to his/her release as provided above of all the Releasees, and for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement as an official in these programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE. Name of Parent/Guardian (Please Print) Phone Number

Parent/Guardian Signature