

**ALL PLAYERS PLEASE READ BEFORE SIGNING.**

**INDIVIDUAL PLAYERS RELEASE OF LIABILITY ASSUMPTION OF RISK AUTHORIZATION FOR MEDICAL CARE**

1. I hereby recognize and acknowledge that participation in recreational activities may involve bodily injury or emotional injury to myself and others. In consideration of being permitted to participate in Kaysville Recreation activities, I hereby assume the risk of such bodily and/or emotional injury and hereby release, waive and discharge Kaysville City, its officers and employees, from all liability of claims therefore resulting from my participation in any city sponsored Recreation activity.

2. I authorize Kaysville Recreation staff to act on my behalf in accordance with their best judgment in the case of an emergency and agree to assume full responsibility for all medical expenses that may arise there from.

3. I hereby expressly agree that this release, waiver, and indemnity agreement is intended to be as broad and as inclusive as permitted by law, and that if any portion here from is found to be invalid, it is agreed that the balance shall not withstanding continue in full force and effect.



*Kaysville Parks & Recreation*

*85 N. 100 E., Kaysville*

*801-544-1788*

[www.kaysvillecity.com](http://www.kaysvillecity.com)

**Kaysville City Parks and Recreation**

**Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19**

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Following the directives of federal, state, and local governments and federal and state health agencies, Kaysville City has put in place preventative measures to reduce the spread of COVID-19. However, the City cannot guarantee that you or your child(ren) will not become infected with COVID-19 when participating in Kaysville City Parks and Recreation activities. Further, attending the Kaysville Parks and Recreation activities could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending Kaysville Parks and Recreation activities and that such exposure or infection may result in personal injury, illness, permanent disability, and/ or death. I understand that the risk of becoming exposed to or infected by COVID-19 at Kaysville Parks and Recreation sponsored activities may result from the actions, omissions, or negligence of myself and others, including, but not limited to, City employees, volunteers, outside vendors and contractors, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself including, but not limited to, personal injury, disability, and/ or death, illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at Kaysville Parks and Recreation sponsored programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the City, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the City, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any City program.

Date:

Division:

Team Name:

Player Name

Phone

Address

City/Zip

Signature (parent if under 18)

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