



# POST COVID-19 Ryan Lemmon Foundation LIABILITY WAIVER

**PLEASE READ BEFORE SIGNING:** In consideration of being allowed to participate in any way in the RYAN LEMMON FOUNDATION, athletics/sports programs whether involving team or individual sports and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury and/or illness from the activities involved in the program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist;
2. The risk to have direct or indirect contact with individuals who have been exposed to and/or diagnosed with one or more communicable diseases, including but not limited to COVID-19 or other medical conditions, diseases, or maladies, and/or any mutation or variation thereof does exist and it is impossible to eliminate the risk that I could become infected through contact with or close proximity to an individual with a communicable disease;
3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
4. 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 hazard to the attention of the nearest official immediately; and,
5. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS RYAN LEMMON FOUNDATION, its officers, officials, agents, employees and/or volunteers, other participants, sponsoring agencies, directors, sponsors, advertisers, and, if applicable, owners and lessors of the premises used to conduct the event (collectively, the "Releasees"), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. 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 VOLUNTARILY WITHOUT ANY INDUCEMENT. PARENT'S/GUARDIAN'S SIGNATURE SHOULD BE ON THE SAME LINE AS PLAYER'S NAME WHERE IT APPEARS ON THIS ROSTER. By signing this LIABILITY WAIVER, as an adult for myself or as a parent or legal guardian agrees to the above statements for each youth player must sign at bottom.

FOR PARENT/GUARDIAN OF PARTICIPANT OF MINORITY AGE: This is to certify that I, as parent/legal guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releases, and, for myself, my heirs, assigns and next of kin, I release and agree to indemnify the Releases from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE.

ADULT NAME PRINTED	MINOR'S NAME PRINTED
ADULT SIGNATURE	DATE



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## Parent / Parent Commitment COVID-19 Form

By completing this form and participating in this program, you must confirm that you and your child will abide by the current guidelines of the County of Orange Public Health Order and RYAN LEMMON FOUNDATION Return To Play Protocols. The Following guidelines are based on the Orange County and City of Irvine Sports Physical Distancing and Safety Plan for Practices and Drills and may change during the season. Please be aware that our ability to continue to practice or play games on City of Irvine fields depends on your compliance with all these requirements.

- ✓ You attest that you and your child have reviewed the RYAN LEMMON FOUNDATION Return To Play Protocols
- ✓ You understand that the use of the fields is limited to practice, drills and scrimmages.
- ✓ You attest that you will not send your child to practice if their temperature is above 100.3° F or if they have COVID-19 symptoms based on CDC guidelines.
- ✓ You attest that if your child has displayed COVID-19 symptoms, you will not allow them to return to practice until they have tested negative for COVID-19 and provide a medical professional's clearance; or at least 10 days have passed since the onset of symptoms, and at least 3 days (72 hours) have passed since recovery (no fever without the use of fever reducing medication).
- ✓ You are encouraged to drop off your child at the beginning of an event and return at the end. If you stay in the park, you must remain outside the enclosed field and practice social distancing from other parents.
- ✓ You attest that you and your child will refrain from unnecessary physical contact with others, including hugs, high fives, and fist pumps which are not permitted per the County protocols.
- ✓ You and your child will sanitize your hands at the beginning, middle and end of the event. We request that each player bring their own bottle of hand sanitizer. Equipment bags must be kept within the area for each stable group, and each bag must be 6 feet from each other. Players should use their own gear and equipment as best as possible.
- ✓ Participants must bring enough water for their own use and have individual drinks / bottles with their name. No shared food/drinks among players. Drinking fountains will not be available.

FOR PARENT/GUARDIAN OF PARTICIPANT OF MINORITY AGE: This is to certify that I, as parent/legal guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releases, and, for myself, my heirs, assigns and next of kin, I release and agree to indemnify the Releases from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE.

ADULT NAME PRINTED	MINOR'S NAME PRINTED
ADULT SIGNATURE	DATE