

**Leszek Wrona's Soccer Academy , LLC**

**Amateur Athletic Waiver and Release of Liability**

Individual/Participant

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Birthday \_\_\_\_\_

Address(Street, City, Zip) \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ E-mail \_\_\_\_\_

Team or Organization \_\_\_\_\_

Outside organizations must provide a certificate of insurance naming Leszek Wrona Soccer Academy ,LLC, as an additional insured prior to playing in facility

**Amateur Athletic Waiver and Release of Liability**

In consideration of being allowed to participate in any way and/or enter upon, use and/or engage in sports activities by Leszek Wrona Soccer Academy ,LLC, including participation in practices, events and/or other uses of the indoor facility at 541 North Main Street Bristol CT, and their athletic/sports programs and related events and activities, the undersigned:

1. Agrees to prior to participating he/she will inspect the facilities and equipment to be used, and if he/she believes anything is unsafe, he/she will immediately advise a representative of Leszek Wrona Soccer Academy ,LLC, of such conditions and refuse to participate;
2. Acknowledge and fully understand that each participate will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions, or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further that there might be other risks not known to us or not reasonably foreseeable at the time;
3. Assume all the foregoing risks and accept personal responsibility for the damage following such injury, permanent disability or death;
4. Release, waive, discharge and covenant not to sue Leszek Wrona Soccer Academy, LLC, or its affiliated clubs, it's respective members, administrators, directors, coaches, and other employees of said organization, participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessees of the premises used to conduct the event, all of which are hereinafter referred to as "releases", from demand, losses or damages on account of injury, including death and damage to property, caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise;
5. Shall defend, indemnify and hold Leszek Wrona Soccer Academy, LLC, its officers, employees, and agents harmless from and against any and all liability, loss, expense, including reasonable attorney fees, or claims for injury or damages arising out of the performance of this Agreement but only in proportion to and to the extent such liability, loss, expense, attorney fees, or claims for injury or damages caused by or result from the negligent or intentional acts or omissions of the individual or group renting space from the facility, its officers, agents or employees.

THE UNDERSIGNED HAVE READ AND ACKNOWLEDGED THAT HE/SHE IS ENTERING THE ABOVE WAIVER AND RELEASE, UNDERSTANDING THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY, WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, IT IS MY INTENTION ON BEHALF OF MYSELF OR MY MINOR CHILD TO SPECIFICALLY RELEASE AND INDEMNIFY LESZEK WRONA SEOOCCER ACADEMY, LLC, FROM ANY AND ALL CLAIMS ARISING FROM THEIR OWN NEGLIGENCE. I AGREE TO IDEMNIFY , DEFEND, AND HOLD HARMLESS LESZEK WRONA SOCCER ACADEMY ,LLC FROM ANY LIABILITES, LOSSES, DAMAGES, SETTLEMENTS, CLAIMS, EXPENSES, AND COSTS ARISING FROM MY OR MY CHILDS PARTICIPATION IN THE DESCRIBED ACTIVITY, SAID INDEMNITY TO INCLUDE COURT COSTS AND REASONABLE ATTORNEY FEES.

Individual Signature (18 and over) \_\_\_\_\_ Date \_\_\_\_\_

Guardian Signature (if minor player) \_\_\_\_\_ Date \_\_\_\_\_

Please speak with your physician before starting this exercise program