



Jack Leasure Basketball Waiver



I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in the Jack Leasure Shooting and Skills Camp, Jack Leasure Basketball clinics or skills sessions.

This release is intended to discharge Jack Leasure and Jack Leasure Basketball from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise

out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

In consideration of being allowed to participate in the event or activity referenced above, I acknowledge, appreciate, and agree that:

I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in the Jack Leasure Shooting and Skills Camp, Jack Leasure Basketball clinics or skills sessions.

This release is intended to discharge Jack Leasure and Jack Leasure Basketball from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

ASSUMPTION OF RISK. I am fully aware that participation in basketball training, camps, clinics and games carries with it certain inherent risks related to COVID-19 transmission ("Inherent Risks") that cannot be eliminated regardless of the care taken to avoid such risks. Inherent Risks may include, but are not limited to, (1) the risk of coming into close contact with individuals or objects that may be carrying COVID-19; (2) the risk of transmitting or contracting COVID-19, directly or indirectly, to or from other individuals; and (3) injuries and complications ranging in severity from minor to catastrophic, including death, resulting directly or indirectly from COVID-19 or the treatment thereof. Further, I understand that the risks of COVID-19 are not fully understood, and that contact with, or transmission of, COVID-19 may result in risks including but not limited to loss, personal injury, sickness, death, damage, and expense, the exact nature of which are not currently ascertainable, and all of which are to be considered Inherent Risks. I hereby voluntarily accept and assume, on behalf of myself and my son, all risk of loss, personal injury, sickness, death, damage, and expense arising from such Inherent Risks. This Assumption of Risk, Release and Waiver of Liability Agreement shall be binding on my, and my son's, heirs, executors, administrators, successors, and assigns. I expressly agree that this Agreement is intended to be as broad and inclusive as is permitted by applicable laws, and that if any portion of this Agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect. This Agreement contains the entire understanding of the parties relating to the subject matter, and shall not be altered, modified, amended, waived or supplemented in any manner whatsoever except by a written agreement signed by both parties hereto or their duly authorized representatives. This Agreement may be executed, made and delivered electronically.

By signing this waiver I acknowledge that I have read the foregoing Agreement and understand its contents; that I am at least eighteen (18) years old and fully competent to execute this Agreement on my behalf and my son's behalf; that I have been sufficiently informed of the risks involved; that I am voluntary signing this Assumption of Risk, Release and Waiver of Liability Agreement as my own free act and deed with full intention to be bound by the same, and free from any inducement or representation.

I hereby additionally consent that my son/daughter may participate in the above activity and I hereby execute the above AGREEMENT, WAIVER, AND RELEASE on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost or expense which they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity. I have carefully read this Agreement, Waiver, and Release and fully understand its contents. I am aware that this is a release of liability and a contract between myself and the above company, and I sign it of my own free will. I further understand that no medical insurance is provided and that no refunds will be given unless activities are changed or cancelled by Jack Leasure Basketball. I further understand that photographs and video may be taken of me during the course of the said activity and that these photographs and video may be used for Jack Leasure Basketball publicity purposes.

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.

Signature of Parent/Guardian _____

Date: _____

Player Name:	
Allergies, Injuries or limitations to be aware of:	
EMG Contact Number:	

Please send the completed and signed form to pt585rocevents@gmail.com