

Fearless Fighters Soccer Waiver Form

In consideration of you accepting this entry, I, the participant, intending to be legally bound, do hereby waive and forever release any and all rights and claims for damages or injuries that I may have against the Event Director, Fearless Fighters Foundation, Inc., John Carroll University, and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend, and understand that this release is binding on my heirs, executors, administrators, or assignees.

I know that playing soccer is a potentially hazardous activity. I should not enter and play unless I am medically able to do so and properly trained. I assume all risks associated with running in this event, including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and field conditions, and waive any and all claims that I might have based on any of those and other risks typically found in playing soccer. I acknowledge all such risks are known and understood by me. I agree to abide by all decisions of any event official relative to my ability to complete the tournament safely. I certify as a material condition to my being permitted to enter this tournament that I am physically fit and sufficiently trained for the completion of this event and that a licensed Medical Doctor has verified my physical condition.

In the event of an illness, injury, or medical emergency arising during the event, I hereby authorize and give my consent to the Event Director to secure from any accredited hospital, clinic, and/ or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me, including but not limited to medical transport, medications, treatment, and hospitalization. As it applies to my participation in this race, I agree to abide by the Center for Disease Control (CDC)'s recommendations for the prevention of the spread of COVID-19 and attest to having read the CDC's guidance at: https://www.cdc.gov. I also agree to abide by any COVID-19 distancing and other safety guidelines issued by the state, the community, or by this race for my participation in this race.

Further, I grant permission to all the foregoing to use my name, voice, and images of myself in any photographs, motion pictures, results, publications, or any other print, video graphics, or electronic recording of this event for legitimate purposes.

This event follows the standard soccer tournament industry policy: All entry fees are non-refundable. We reserve the right to postpone or cancel the event due to circumstances beyond our control, such as a natural disaster or emergency, or as required to protect the safety of participants and staff. No refunds will be issued under these circumstances. We reserve the right to change the details of the event without prior notice. I understand that my entry fee is nonrefundable, and registraions are non-transferable.

By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above release and waiver, including the no refund policy.

Participent or Guardian's Signature	Date