



ACKNOWLEDGMENT OF WARNING, WAIVER, and RELEASE OF LIABILITY
 Diocese of Pensacola-Tallahassee ("Diocese") & Catholic Youth Sports League ("CYSL")



(Please Complete a Separate Form for Each Child)

Child Acknowledgement of Warning and Release of Liability

I, _____, do hereby acknowledge that I have been fully advised, cautioned, and warned by the proper administrative and coaching personnel that by participating in any CYSL athletic event, activity, and/or program, I am exposing myself to the risk of serious bodily injury. These potential injuries include, but are not limited to, sprains, fractures, ligament and/or cartilage damage, impairment in the use of limbs, head trauma, brain damage, paralysis, or even death. Having been so cautioned and warned of the inherent risk associated with participating in CYSL athletic events, activities, and programs, it is still my desire to participate in CYSL athletic events, activities, and programs this school year. I hereby further acknowledge that I waive and release the Diocese and CYSL from all liability and do so with full knowledge and understanding of the inherent risk of serious bodily injury to which I am exposing myself by participating in any CYSL athletic event, activity, and/or program.

Parent Acknowledgment of Warning and Release of Liability

I do hereby acknowledge that I have been fully advised, cautioned and warned by the proper administrative and coaching personnel that by participating in any CYSL athletic event, activity, and/or program this school year, my child, _____, is exposing himself or herself to the risk of serious bodily injury. These potential injuries include, but are not limited to, sprains, fractures, ligament and/or cartilage damage, impairment in the use of limbs, head trauma, brain damage, paralysis, or even death. Notwithstanding such warnings, and with full knowledge and understanding of the inherent risk of serious bodily injury which may result, I hereby give my unconditional consent for my child to participate in any and all CYSL athletic events, activities, and/or programs. I hereby further acknowledge that I waive and release the Diocese and CYSL from all liability and do so with full knowledge and understanding of the inherent risk of serious bodily injury to which my child is exposed to by participating in CYSL athletic events, activities, and/or programs.

I have been advised that if my child suffers from any medical condition or illness, he or she should not participate in any CYSL athletic events, activities, and/or programs without a doctor's prior written permission. I hereby agree that I will not allow my child to participate in any CYSL athletic events, activities, and/or programs if he/she is not in good health or has been diagnosed with a medical condition or illness that may place my child at risk of illness, bodily injury, and/or death.

In case of a medical emergency, I hereby give permission to the Diocese and CYSL Representatives, coaches, employees and volunteers to provide and/or order any necessary medical treatment for my child. I hereby also give permission to the Diocese and the CYSL to disclose the information contained on my child's physical health forms to medical personnel.

I further agree to waive my right to sue, release from liability, indemnify and hold harmless the Diocese of Pensacola-Tallahassee, Pensacola Catholic High School, Sacred Heart Cathedral Parish and School - Pensacola, St. Paul Catholic Parish and School - Pensacola, Little Flower Catholic Parish and School - Pensacola, St. John Catholic Parish and School - Pensacola, St. John Catholic Parish and School - Panama City, St. Mary Catholic Parish and School - Fort Walton Beach, Trinity Catholic School - Tallahassee, Blessed Sacrament Catholic Parish - Tallahassee, St. Ann Catholic Parish - Gulf Breeze, Redeemer Lutheran School, Episcopal Day School, Creative Learning Academy, DT Preparatory Academy, Lighthouse Private Christian Academy, CYSL, CYSL Council, CYSL Director, Clergy, School Administrators, Coaches, Employees, Staff and Volunteers from any and all legal claims, causes of action and damages arising out of or related to any injury, illness, accident, or death which may occur as a result of my child's participation in CYSL athletic events, activities, and/or programs.

I understand and agree that the Diocese and CYSL will not be responsible or liable for any medical costs associated with any illness or injury resulting from my child's participation in any CYSL athletic event, activity, and/or program. This Waiver shall be construed in accordance with the laws of the State of Florida and is intended to be as broad and inclusive as permitted under Florida law. If any portion of this Waiver is determined to be invalid for any reason, it is my intent that the remaining provisions shall continue in full force and effect.

(SEE BACK OF PAGE)

I am signing this Waiver freely and under no duress. I fully understand the legal consequences of signing this Waiver, including (1) releasing the Diocese and CYSL from all liability; (2) waiving my right to sue the Diocese, CYSL and the individuals and entities stated above; and (3) assuming all risks, hazards and complications of my child's participation in any CYSL athletic event, activity, and/or program, whether known or unknown to me, regardless of how likely or remote.

I acknowledge and represent that (1) I am at least eighteen (18) years of age and competent; (2) there is full and adequate consideration for this Waiver and Release; (3) this Waiver and Release is a material and required condition for my child's participation in any CYSL athletic event, activity, and/or program; and (4) I will comply with all instructions, rules, regulations, and requirements related to my child's participation in any CYSL athletic event, activity, and/or program.

My signature below constitutes my acknowledgment that: (1) I have carefully read this Waiver and Release in its entirety and understand and fully agree to all its terms and conditions; (2) the inherent risk of serious bodily injury and possible death as a result of my child's participation in any CYSL athletic event, activity, and/or program has been satisfactorily explained to me and I have all of the information I need and desire to make an informed decision as to whether my child should participate in CYSL athletic events, activities, and/or programs; (3) I have read and accurately completed all physical health forms; (4) I give my informed authorization and consent to allow my child to participate in any CYSL athletic events, activities, and/or programs; (5) This Waiver and Release is signed in advance of my child's participation in any CYSL athletic event, activity, and/or program and shall forever be in effect and enforceable; and (6) This Waiver constitutes the entire agreement regarding these matters and supersedes any and all prior and verbal discussions regarding such matters.

NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF THE DIOCESE OF PENSACOLA-TALLAHASSEE AND THE CATHOLIC YOUTH SPORTS LEAGUE OF THE DIOCESE OF PENSACOLA-TALLAHASSEE USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE DIOCESE OF PENSACOLA-TALLAHASSEE AND THE CATHOLIC YOUTH SPORTS LEAGUE OF THE DIOCESE OF PENSACOLA-TALLAHASSEE IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE DIOCESE OF PENSACOLA-TALLAHASSEE AND THE CATHOLIC YOUTH SPORTS LEAGUE OF THE DIOCESE OF PENSACOLA-TALLAHASSEE HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

_____, _____, _____, _____
Signature Date Witness Date

_____, _____, _____
Print Witness Date