



Bayside FC Father's Day Event | Waiver/Refund Agreement

Participant Name: _____

1. **PERMISSION FOR EMERGENCY TREATMENT:** I hereby grant permission to Bayside FC, including its affiliates and employees, to secure proper treatment for my child in case of a surgical or medical emergency, including hospitalization, provided, he or she is unable to communicate, and when delay might endanger the life or health of my child. I give permission for my child to receive emergency treatment and understand that every attempt will be made to contact the emergency contact.

2. **PERMISSION TO PARTICIPATE:** I individually and as the legal guardian, do hereby give my permission for my child to participate in the Bayside FC Father's Day Event, and use the facilities in connection with the event. In consideration of my child's enrollment in the event, I agree to indemnify and hold harmless Bayside FC, and all its affiliates, trustees, officers, agents and employees as well as holding them harmless from all claims, liability, loss and damage and expense which may in any way arise from my child's participation in the event, including with limitation, all claims which my child, or legal guardian may have for personal injuries to other person which are caused by my child. To the best of my knowledge and belief, my child is of sound health and I know of no reason why they cannot participate in the event.

3. **RELEASE:** I understand the nature of event activities, certify that my child is able to participate in the program and grant permission for said participation. On behalf of myself, my child, and our assigns, executors and heirs, I hereby release, discharge, covenant not to sue, and agree to indemnify and hold harmless Bayside FC, and all its affiliates, trustees, officers, agents and employees from any and all liability, damage, and claims of any nature arising from or in any way related to my child's participation in this program.

4. **COVID-19:** By registering my child for the Bayside FC Father's Day Event, I acknowledge that an inherent risk of COVID-19 exists in any public place where people are present. By enrolling my child in this event, I voluntarily assume all risks related to exposure to COVID-19 and agree to hold harmless Bayside FC, and all its affiliates, trustees, officers, agents and employees, for any illness or injury. Further, I, the undersigned, hereby hold harmless Bayside FC, and all its trustees, officers, agents and employees, from liability for any and all medical and or accident expenses which my child may incur during their involvement. I hereby certify that my child is provided coverage via personal health and accident insurance in affect, which is sufficient to cover any and all of the expenses, noted above which might occur.

5. **PHOTO/MEDIA RELEASE:** I hereby authorize for Bayside FC to publish without any compensation whatsoever any such photographs of my child in print and or electronic formats with or without my child's respective name(s), including but not limited to social media content, club newsletters, advertising, web and other content.

6. **CANCELLATIONS/REFUNDS:** Cancellations are not refundable. Additionally, NO REFUNDS will be given to participants who leave the event voluntarily or who are removed for disciplinary reasons.

Date: _____ **Signature:** _____

Emergency Contact Name : _____ **Emergency Contact Phone Number:** _____