## WAIVER AND RELEASE OF LIABILITY

In consideration of the risk of injury while participating in The SGT. Jimmy scholarship cup charity soccer tournament (the "Activity"),

and as consideration for the right to participate in the Activity, I hereby, for myself, my heirs, executors,

administrators, assigns, or personal representatives, knowingly and voluntarily enter into this waiver and

release of liability and hereby waive any and all rights, claims or causes of action of any kind whatsoever

arising out of my participation in the Activity, and do hereby release and forever discharge Shabooms Inc.,

located at 518 Granada Ave, Middletown, Ohio 45044, their affiliates, managers, members, agents,

attorneys, staff, volunteers, heirs, representatives, predecessors, successors and assigns, for any physical or

psychological injury, including but not limited to illness, paralysis, death, damages, economical or emotional loss, that I may suffer as a direct result of my participation in the aforementioned Activity,

including traveling to and from an event related to this Activity.

I am voluntarily participating in the aforementioned Activity and I am participating in the Activity entirely

at my own risk. I am aware of the risks associated with traveling to and from as well as participating in this

Activity, which may include, but are not limited to, physical or psychological injury, pain, suffering, illness.

disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and

death. I understand that these injuries or outcomes may arise from my own or others' negligence, conditions

related to travel, or the condition of the Activity location(s). Nonetheless, I assume all related risks, both

known or unknown to me, of my participation in this Activity, including travel to, from and during this

Activity.

I agree to indemnify and hold harmless Shabooms Inc. against any and all claims, suits or actions of any

kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone on my behalf,

including attorney's fees and any related costs, if litigation arises pursuant to any claims made by me or by

anyone else acting on my behalf. If Shabooms Inc. incurs any of these types of expenses, I agree to

reimburse Shabooms Inc..

I acknowledge that Shabooms Inc. and their directors, officers, volunteers, representatives and agents are

not responsible for errors, omissions, acts or failures to act of any party or entity conducting a specific event

or activity on behalf of Shabooms Inc..

I acknowledge that this Activity may involve a test of a person's physical and mental limits and may carry

with it the potential for death, serious injury, and property loss. The risks may include, but are not limited

to, those caused by terrain, facilities, temperature, weather, lack of hydration, condition of participants,

equipment, vehicular traffic and actions of others, including but not limited to, participants, volunteers.

spectators, coaches, event officials and event monitors, and/or producers of the event.

I acknowledge that I have carefully read this "waiver and release" and fully understand that it is a release of

liability. I expressly agree to release and discharge Shabooms Inc. and all of its affiliates, managers,

members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, successors and assigns,

from any and all claims or causes of action and I agree to voluntarily give up or waive any right that I

otherwise have to bring a legal action against Shabooms Inc. for personal injury or property damage.

To the extent that statute or case law does not prohibit releases for negligence, this release is also for

negligence on the part of Shabooms Inc., its agents, and employees.

In the event that I should require medical care or treatment, I agree to be financially responsible for any

costs incurred as a result of such treatment. I am aware and understand that I should carry my own health

insurance.

In the event that any damage to equipment or facilities occurs as a result of my or my family's willful

actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated

with any actions of neglect or recklessness.

This Agreement was entered into at arm's-length, without duress or coercion, and is to be interpreted as an

agreement between two parties of equal bargaining strength. Both the Participant,

\_\_\_\_\_, and Shabooms Inc. agree that this Agreement is clear and unambiguous as

to its terms, and that no other evidence will be used or admitted to alter or explain the terms of this

Agreement, but that it will be interpreted based on the language in accordance with the purposes for which

it is entered into.

In the event that any provision contained within this Release of Liability shall be deemed to be severable or

invalid, or if any term, condition, phrase or portion of this agreement shall be determined to be unlawful or

otherwise unenforceable, the remainder of this agreement shall remain in full force and effect, so long as

the clause severed does not affect the intent of the parties. If a court should find that any provision of this

agreement to be invalid or unenforceable, but that by limiting said provision it would become valid and

enforceable, then said provision shall be deemed to be written, construed and enforced as so limited.

In the event of an emergency, please contact the following person(s) in the order presented:

## **Emergency Contact Contact Relationship Contact Telephone**

I, the undersigned participant, affirm that I am of the age of 18 years or older, and that I am freely signing

this agreement. I certify that I have read this agreement, that I fully understand its content and that this

release cannot be modified orally. I am aware that this is a release of liability and a contract and that I am

signing it of my own free will.  Participant's Name:	
Participant's Address:	
Signature:	
Date:	
Email:	
PARENT / GUARDIAN WAIVER FOR MINORS In the event that the participant is under the age of consent (18 years of age), then the must be	is release
signed by a parent or guardian, as follows: I hereby certify that I am the parent or guardian ofabove, and	_, named
do hereby give my consent without reservation to the foregoing on behalf of this indiv Parent / Guardian Name:	vidual.
Relationship to Minor:	
Signature:	
Date:	
Email:	