



CAPITAL CITY BASKETBALL LEAGUE WAIVER OF LIABILITY

I understand and appreciate the fact that playing basketball is a very strenuous and potentially hazardous activity. I realize that I should not take part in this summer basketball league unless I am medically fit and properly trained. Knowing this, I do certify that to the best of my knowledge that I am in excellent physical condition and I have no medical condition that could likely be aggravated or worsened by participation in this program. I agree to abide by any decisions of any basketball official connected in any way with this program relative to my ability to safely play basketball.

I am fully aware of and assume all risks associated with the game of basketball, including, but not limited to falls, contact with other participants, contact with jewelry or any other object(s) worn by other participants, contact with the basketball(s), and I also understand that failing to wear appropriate protective gear enhances the potential for injuries. Accordingly, I agree to supply, at my own expense and use with practicing or playing basketball, appropriate protective gear normally used in the game of basketball. I am also fully aware that I am solely responsible for my own safety while traveling to or from participating in this program.

In addition, I fully understand that being under the influence of any type of drug while playing basketball has proven to be hazardous and, in many cases, fatal. I, therefore, promise not to participate in this program under the influence of any illicit drugs or any other substances which may potentially create a risk of injury.

I also understand that while I am participating in the program, I am responsible for my own personal property and risk losing it upon bringing it into the building. I agree to take all steps necessary to secure the safety of any such property such as, but not limited to, keeping it safely in a locked vehicle. I also understand that I should only bring the types of property necessary to participate in the program. I fully waive all claims of liability of whatever sort for all lost, damaged, or destroyed property of whatever kind that I may bring while participating in the basketball league. I also state that this waiver includes any motorvehicle I drive to participate in this program.

Having read this waiver and knowing these facts and in consideration of you accepting my entry, I, for myself and for anyone entitled to act in my behalf, waive and release the Capital City Basketball League, the basketball league director or past participants/parties of interest and any staff or volunteers, and all sponsors, basketball officials, or volunteers, facility staff, owners, their representatives, successors or assigns, from any and all claims or liability for death or for damages for any and all injuries to me or my property arising out of or in connection with this event, including, without limitation, claims or liabilities resulting from those matters described in the preceding paragraphs. This waiver extends to all claims of any kind or nature, whether foreseen or unforeseen, known or unknown.

I further grant permission to all of the foregoing organizations and entities to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

PLAYER'S SIGNATURE

DATE

PARENT'S SIGNATURE ALSO REQUIRED
FOR PLAYERS UNDER 18 YEARS OF AGE

Please submit online at www.capcityleague.com
along with the Application page and Covid-19
Waiver.



CAPITAL CITY BASKETBALL LEAGUE - WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate on behalf of Capital City Basketball League's athletic program and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Capital City Basketball League their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

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 IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of participant: _____

Participant signature: _____

Date signed: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases.

Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, even if arising from their negligence, to the fullest extent provided by law.

Name of parent/guardian: _____

Parent guardian/signature: _____

Date signed: _____