Parent Acknowledgement Form

Terms and Conditions of Participation for Jan – Dec 2022

PLEASE READY CAREFULLY BEFORE SIGNING

In consideration of your minor child or ward being permitted to participate in any and all camps, practices, games, individualized instruction and other sports, tutoring, lessons and social activities conducted by or under the direction of Westside Baptist Church (WBC) and/or Westside Sports League (WSL), or by either or both of them (collectively, "Campus Activities") and other good and valid consideration, wherever any such Campus Activities may occur from time to time, you hereby attest that, after reading this Waiver and Permission Form completely and carefully, including the notice above your signature, as required by Florida Statutes 744.301, you acknowledge that your minor child's or ward's participation in, and your attendance at, all Campus Activities, are entirely voluntary, and that you understand and agree as follows:

RELEASE OF LIABILITY: I agree, on behalf of my child or ward, my own behalf, and on behalf of any other parent or guardian of the child or ward identified below, to waive and release WBC, WSL, any and all owners and operators of campus facilities and other athletic or other facilities used by WBC or WSL in connection with the Campus Activities, and all of their respective parent, subsidiary and other affiliated or related entities, and the officers, directors, employees, agents, coaches, managers, administrators, representatives, employees, successors, assigns, and volunteers of each of the foregoing legal or natural persons (collectively, the "Released Parties") from all liabilities, claims, actions, causes of action, suits, damages, losses, costs or expenses of any nature (collectively, "Claims") associated with and/or arising out, in connection with or in any way relating to my child or ward's participation in any Campus Activities or my attendance at any such Campus Activities, regardless of whether such risks are open and obvious or otherwise. Further on behalf of myself, my child or ward, and any other parent or guardian of the child or ward identified below, I hereby release, covenant not to sue, and forever discharge the Released Parties of and from all Claims arising in any manner out of or in any way relating to my child's or ward's participation in the Campus Activities. Without limiting the generality of the foregoing, I acknowledge that I am permitting my child or ward to participate in the Campus Activities at a time during which a COVID-19 pandemic is present throughout the United States, including in the specific geographic location at which the Campus Activities will be held. Accordingly, I agree, on behalf of my child or ward, on my own behalf and on behalf of any other parent or guardian of the child or ward identified below, to assume all risks associated with our child's or ward's participation in the Campus Activities and hereby release any Claims against the Released Parties that may arise, or be alleged to have arisen, in any way as a result of such participation. The Released Parties shall bear no responsibility for any personal injuries (including death) that may arise as a result of the transmission of any infectious diseases during my child's or ward's participation in Team Activities or my or any other parent's or guardian's attendance at any such Campus Activities.

INDEMNITY/INSURANCE: I agree to indemnify, defend and hold WBC and/or WSL and the other Released Parties harmless from and against any and all Claims arising out of or in any way connected with my child's or ward's participation in the Campus Activities, wherever any such Team Activities may occur, including, but not limited to, all attorneys' fees and disbursements, through and including any appeal. I understand and agree that this indemnity includes any Claims based on the sole negligence, action or inaction of any of the Released Parties and covers bodily injury (including death), property damage, and loss by theft or otherwise, whether suffered by me or my child or ward either before, during or after participation in any Campus Activity.

PHYSICAL CONDITION/MEDICAL AUTHORIZATION: I hereby certify that my child or ward is physically fit for participation in the Campus Activities and I have not been advised otherwise by any medical professional or other person. In connection with any injury sustained or illness or medical conditions experienced during my child's or ward's participation in, or attendance at, any of the Campus Activities, I authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by the attending medical personnel if I am not able to act on my child's or ward's behalf. Additionally, I authorize medical treatment for my child or ward, at my cost, if the need arises; however, I acknowledge that the Released Parties will have no duty, obligation or liability arising out of the provision of, or failure to provide, medical treatment.

GOVERNING LAW: This Waiver and Permission Form will be governed by the laws of the State of Florida, and any legal action relating to or arising out of this Waiver and Permission Form will be commenced exclusively in the Circuit Court of the Judicial Circuit in and for Duval County, Florida AND I SPECIFICALLY WAIVE THE RIGHT TO TRIAL BY JURY WITH RESPECT TO ANY CLAIM.

By signing below, I certify that: (1) I have fully and completely read and understand this Waiver and Permission Form; (2) I am 18 years of age or older; (3) I am the legal guardian of the minor child or ward identified below; (4) the information set forth above pertaining to my child or ward is true and complete; and (5) I consent and agree to all of the foregoing on behalf of myself and my minor child or ward identified below.

Name of Participant #1:	
Name of Participant #2:	
Name of Participant #3:	
Signature of Parent or Court Appointed Guardian:	
Name of Parent:	-
Date:	