

**Force Volleyball Academy/Michigan Volleyball Training LLC Waiver & Liability
Tournaments, Camps, Clinics, Private Training, and Conditioning**

Player Information

Name _____ Date of Birth _____ Age _____
Address _____ City _____
Zip _____ Player Phone _____
Email _____ School _____
Club Team _____
Primary Insurance Co. _____ Group/Policy# _____

Parent/Guardian Information

Parent Name _____ Parent Phone _____
Parent Email _____
Parent Name _____ Parent Phone _____
Parent Email _____

Agreement and Release of Liability/Emergency Medical Release

I _____, am the parent and/or legal guardian of _____,
(a minor), and hereby acknowledge that I have voluntarily applied for said minor to participate in the volleyball training conducted by Force Volleyball Academy/Michigan Volleyball Training LLC both indoors, outdoors, or in any other training capacity.

As a lawful consideration for being permitted to participate in these volleyball or strength training activities and to use equipment, I hereby consent and agree on behalf of both myself and the minor named above, that neither I, nor the minor's heirs, distributes, guardians, legal representatives or assigns will make any claim against, sue, attach the property of, or prosecute, Force Volleyball Academy/Michigan Volleyball Training LLC., Bloomfield Schools, Livonia Schools, Madonna University and/or it's sub contractors, officers, directors, members, coaches, instructors, representatives, or other agent as a result of my participation in clinics conducted by Force Volleyball Academy/Michigan Volleyball Training LLC sponsored activities. In addition, I hereby release, discharge and hold harmless Michael Scott, Claire Urban, Amy Osborn, or Force Volleyball Academy/Michigan Volleyball Training LLC from all actions, claims or demands which either I, or the above named minor, their heirs, distributes, guardians, legal representatives or assigns may now or may hereafter have for personal injury or property damage resulting from said minor's participation in Force Volleyball Academy/Michigan Volleyball Training LLC sponsored volleyball activities and strength training sessions, including any claim or demand arising out of injuries or conditions caused or aggravated by our/my refusal to obtain available medical treatment based on religious or philosophical beliefs.

COVID-19: The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. It is believed that an individual can be infected with COVID-19 without their knowledge and be asymptomatic. Force Volleyball Academy/ Michigan Volleyball Training LLC has put in place preventative measures to reduce the spread of COVID-19. However, Force Volleyball Academy/ Michigan Volleyball Training LLC cannot guarantee that I or anyone else will not become infected with COVID-19, including my spouse, guests, unborn child, or relatives. Participation in a Force Volleyball Academy/ Michigan Volleyball Training LLC sports program(s), related event, or activity, could increase the risk of contracting COVID-19. By signing this agreement, I ACKNOWLEDGE the contagious nature of COVID-19 and VOLUNTARILY ASSUME THE RISK that I may be exposed to or infected by COVID-19 by participating in a Force Volleyball Academy/ Michigan Volleyball Training LLC sports program(s), related event, or activity, and that such exposure or infection may result in personal injury, illness, permanent disability, and death to myself, my spouse, guests, unborn child, or relatives. I understand that the risk of becoming exposed to or infected by COVID-19 at a Force Volleyball Academy/ Michigan Volleyball Training LLC sports program(s), related event, or activity may result from the actions, omissions, or negligence of myself or others, including, but not limited to, Force Volleyball Academy/ Michigan Volleyball Training LLC employees, volunteers, and program participants. I UNDERSTAND AND VOLUNTARILY ACCEPT AND ASSUME ALL the foregoing risks related to COVID-19 and accept sole responsibility for any injury or illness that may occur. Further, I UNDERSTAND AND AGREE that this release includes any Claims based on the actions, omissions, or negligence of Force Volleyball Academy/ Michigan Volleyball Training LLC, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Jersey sports program(s), related event, or activity.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULL UNDERSTAND ITS CONTENTS. I AM AWARE THAT THESE IS A RELEASE OF LIABILITY ON BEHALF OF THE MINOR INDIVIDUAL NAMED ABOVE, AND A CONTRACT BETWEEN MYSELF, AS THE PARENT OR LEGAL GUARDIAN OF SAID MINOR, AND FORCE VOLLEYBALL ACADEMY, AND HEREBY SIGN IT OF MY OWN FREE WILL.

Parent Signature _____ Date _____

MANDATORY! Parents must sign this waiver in order for the above listed minor to participate.

In case of emergency, contact:

Name(s) _____ Phone _____

Alt Phone _____

Primary Insurance Co. _____

Group # _____