

REAL LIFE MINISTRIES

LIABILITY WAIVER

MEDICAL RELEASE:

I/WE understand that there are certain risks of injury inherent in the practice and play of this sport and I/WE am/are willing to assume these risks on behalf of my child. I/WE certify that my child is in good physical condition and does not have any physical or mental disabilities or infirmities that would restrict full participation in the activities of this sport. I/WE certify that my child may participate in strenuous activities related to this sport. My child may receive emergency medical treatment, if needed, and there are no limitations to my child's participation except where stated in writing. REAL LIFE MINISTRIES and its members are not responsible for any costs related to injuries incurred during the REAL LIFE MINISTRIES activities. I/WE hereby release, discharge and/or otherwise indemnify REAL LIFE MINISTRIES, and its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized by the Programs, against any claim by or on behalf of the participant as a result of the participant's participation in the Program. This includes transportation to or from the Program and social events whether the result of negligence or any other cause.

REGISTRATION AGREEMENT:

As a parent/legal guardian of the above participant, a legal minor, I/WE agree that the participant and I/WE will abide by the rules of the REAL LIFE MINISTRIES Youth Sports and its affiliated organizations and their sponsors.

MEDIA RELEASE: By signing this form, I/WE hereby give REAL LIFE MINISTRIES licenses and legal representatives the irrevocable right to use mine or my child's name, picture, portrait, or photograph in all forms and media and in all manners. I/WE am/are the parent(s) or legal guardian of the minor named above and have the legal authority to execute the above release. I/WE approve the foregoing and waive any rights in the premises. (Requests will be granted on a case-by-case basis.)

Participant Name: _____

Parent(s) or Legal Guardian Name(s): _____

Signature(s) _____

Date: _____