

## WAIVER AND RELEASE for FALL COLLEGE SHOWCASE

In consideration for being able to be present for and/or participate in Fall College Showcase at Sonny Sportsplex ("Event"), the below named person on behalf of myself, my heirs, assigns, legal representatives and/or as legal guardian of any minor participant named below (collectively "Participant"), agrees to the following:

1. **Acknowledgment and Assumption of Risk.** Participant acknowledges that there is an inherent risk of injury and exposure to COVID-19 that exists in any public place where people are present. COVID 19 is an extremely contagious disease that can lead to severe illness and death. According to the Centers for Disease Control and Prevention, senior citizens and guests with underlying medical conditions are especially vulnerable. By being at the Event, you voluntarily assume all risks related to exposure to COVID19.
2. **Release of Liability and Indemnification.** Participant hereby waives, releases, and discharges, on behalf of Participant and Participant's executors, administrators, heirs, next of kin, successors, and assigns, the Fall College Showcase at Sonny Sportsplex, its employees or from any and all claims, demands, costs, liability and causes of action whatsoever that may arise as a result of participating in the Event, including but not limited to, any claims, causes of action, liability, damages, demands and costs related to illness, injury or death to Participant resulting from participating, injury or COVID 19. Participant hereby agrees to indemnify and hold the Fall College Showcase or Sonny Sportsplex harmless from and against any and all liability, loss, damage or injury as well as all costs and expenses (including attorneys' fees and costs of any suit related thereto), suffered or incurred, to the extent arising from any of Participant's participation in the Event including but not limited to illness, injury or death resulting from injury or COVID 19.

You are aware that this Agreement contains a release and waiver of liability and a waiver of all your rights and claims for damages that you (and others claiming through you) may have that exist now or may arise in the future as a result of injury to your person or property, or your death, that you may sustain by engaging in the activities under this Agreement. You further agree that no oral representations, statements or inducements apart from the foregoing written agreement have been made. The laws of the State of South Carolina shall govern the interpretation and construction of this Agreement. By signing below, you (and your parent/guardian if you are under the age of 18) acknowledge and agree that you have signed this Agreement on your own free will.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If under the age of 18: Parent or Guardian:

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_