

Nona Volleyball Academy Waiver and Release Form

I acknowledge that volleyball or any sporting event is an extreme test of a person's physical and mental limits and that my participation in a volleyball event can cause potential death, serious injury, or property damage. With a full understanding of the potential risks, I HEREBY ASSUME THE RISKS OF PARTICIPATING OR OFFICIATING IN A VOLLEYBALL EVENT. I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns:

a) I WAIVE, RELEASE, AND DISCHARGE from any and all claims or liabilities for death or personal injury or damages of any kind, EXCEPT THAT WHICH IS THE RESULT OF GROSS NEGLIGENCE AND/OR WANTON MISCONDUCT OF PERSONS OR ENTITIES LISTED BELOW, which arise out of or relate to my traveling to and from or my participation in any volleyball practice or event, THE FOLLOWING PERSONS OR ENTITIES: NONA VOLLEYBALL ACADEMY and LAKE NONA VOLLEYBALL ACADEMY and its officers, directors, board members, employees, representatives, coaches, practice sites and facilities, and agents of any of the above as well as USA Volleyball, its Regional Volleyball Associations and Florida AAU, tournament directors, sponsors, and tournament facilities, and the officers, directors, employees, representatives, and agents of any of the above;

b) I AGREE NOT TO SUE any of the persons or entities listed above for any of the claims or liabilities that I have waived, released or discharged herein; and

c) I INDEMNIFY AND HOLD HARMLESS the persons or entities mentioned above from any claims made or liabilities assessed against them as a result of my actions.

In consideration of the rights and privileges granted to me by my membership with the AAU and USAV, by signing the membership and registration form and checking off the box below, I certify that:

1. I have read and understand the Waiver and Release of Liability.
2. I understand that I have given up substantial rights.
3. I (or my parent or legal guardian) am at least eighteen (18) years old.
4. I agree and consent to abide by the Waiver and Release of Liability set forth herein.

I HAVE READ THIS AGREEMENT AND UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A COMPLETE RELEASE OF LIABILITY AND A BINDING CONTRACT, AND I SIGN IT OF MY OWN FREE WILL. I CERTIFY THAT I AM AT LEAST 18 YEARS OF AGE ON THE DATE HEREOF, AND IF I AM SIGNING ON BEHALF OF A MINOR PARTICIPANT, THAT I AM THE PARTICIPANT'S PARENT OR LEGAL GUARDIAN