

LAKELAND ATHLETIC FIELD RELEASE OF LIABILITY/WAIVER FORM

By signing below, I _____, of Team _____

acknowledge that all activities sponsored or conducted by Lakeland Community Church (LAKELAND) are likely to be active and potentially dangerous and may result in accident, loss, damage, or injury ranging from broken bones to paralysis or death.

With full knowledge of these dangers, and intending to be legally bound, I hereby agree for myself and on behalf of all of my family and heirs to RELEASE Lakeland and any of its representatives, agents, directors, officers, members, and owners of any equipment or property upon which the equipment is located, including but not limited to Lakeland Community Church, the owner of the property on which the Soccer field is located at 913 NE Colbern Road, Lee's Summit, MO from any and all liability claims, demands or any causes of action, and NOT TO SUE OR OTHERWISE make ANY CLAIMS against LAKELAND or Owners whatsoever which may arise during my participation in any activities at Lakeland Community Church.

I intend this RELEASE OF LIABILITY to be effective whether or not any loss, damage, injury or death RESULTING FROM THE NEGLIGENCE of Lakeland or Owners. I understand that negligence means a failure to do an act which a reasonably careful person would do, or the doing of an act which a reasonably careful person would not do, under the same or similar circumstances to protect him or herself; or others, from accident, injury or death. I understand that there are no professional or certified trainers, or medical personnel on staff. I will follow the advice of and use the services of amateur coaches at my own risk.

I agree to be solely responsible for my own safety and to take every precaution to provide for my own safety and well-being while participating in activities sponsored or conducted by Lakeland, including inspecting all equipment and make my own assessment as to whether it is safe and free from all defects. This RELEASE AND WAIVER is given in the interest of permitting Lakeland to feel free to donate services and to help without fear of liability. I "Hold Harmless" any and all parties involved with Lakeland Community Church. I further understand and state that I have my own medical insurance in full force and effect. I understand that any claim for coverage of medical bills will be submitted to my own insurance company.

My release is given in exchange for the ability to use the facility of Lakeland Community Church and the equipment, located on Lakeland Community Church's property and similar waivers to be granted on my behalf by other members of Lakeland. This RELEASE AND WAIVER has no expiration date.

Signature

Date

Insurance Carrier

Group #

ID #

**In Emergency,
contact**

Address

Phone

.....

IF ANY PARTICIPANT IS UNDER 18, PARENT OR GUARDIAN MUST READ AND SIGN BELOW.

I am the legal guardian of the above minor participant and have read the above application and RELEASE AND WAIVER. I hereby consent to the terms stated above and RELEASE AND WAIVER on behalf of named minor participant, and give my consent to the participation of the above named minor in all activities of Lakeland on the terms stated.

Signature

Date

(Parent or Legal Guardian)

.....