SURF CITY CHALLENGE

ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in "Surf City Challenge" programs, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

The risk of injury from the activities involved in this program are significant, including the potential for, but not limited to, falls, slips, sprains, broken bones, contact with other players, paralysis, sudden death, potholes, standing water and other conditions of the field, along with, humidity, heat, cold, and other weather conditions inherent to training and conditioning. And while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist.

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES or others, and assume full responsibility for my participation. I certify that I AM OF THE AGE THAT MYSELF AND MY PARENT OR LEGAL GUARDIAN HAS STATED ON MY APPLICATION; and that This waiver remains in full force and effect until specifically revoked in writing by me.

I willingly agree to comply with all of the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my participation, in or near my presence, I will remove myself from participation and/or proximity of the hazard and bring it to the attention of the nearest official immediately; I also consent to having my likeness, image, picture, or videos of myself used in any advertising or promotion by "Viking Nation Youth Football Camp" without further compensation.

I, for myself, and on behalf of my heirs, assigns, personal representatives, and next of kin, HEREBY RELEASE AND HOLD HARMLESS, Surf City Challenge, game site host, their agents, assistants, volunteers, medical personal, officers, and their employees, sponsoring agencies, sponsors, advertisers, owners or lessors of any premises used to conduct the event (known herein as RELEASES), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss, or damage to person or property, WHETHER ARISING FROM NEGLIGENCE OF THE RELEASES OR OTHERWISE.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT. I FULLY UNDERSTAND ITS TERMS. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Participant's Name (please print):	D.O.B.:
Participant's Signature:	Date:
Parent's /Coaches Name (please print):	Phone number:
Parent's /Coaches Signature:	Date: