



Participant Authorization and Release

I \_\_\_\_\_, as the parent/legal guardian of \_\_\_\_\_ ("my child"), represent that I have the authority to enter into this letter agreement and I hereby give permission for my child to attend A-Game Sports, LLC's ("A Game Sports") programs, events, camps, clinics, instructions, training, drills, games, competitions, and any other related or incidental activities or matters (collectively, the "Activities"), and to participate in all A Game Sports' Activities

I understand that there are inherent risks in the Activities and that my child's participation in the Activities may involve risk of harm or serious injury and/or death. The risk to have contact with individuals, who have been exposed to and/or have been diagnosed with one or more communicable diseases, including but not limited to COVID-19 or other medical conditions, diseases, or maladies does exist, and it is impossible to eliminate the risk that I could be exposed to and/or become infected through contact with or close proximity with an individual with a communicable disease. I also understand that A Game Sports does not maintain or provide any kind of accident or medical coverage insurance for its participants. Therefore, I, on my own behalf and on behalf of my child, agree that any and all costs for my child's medical attention/treatment which attention/treatment is needed or warranted as a result of my child's participation in A Game Sports' Activities, to the extent not covered by insurance provided by me, shall be my sole responsibility.

I also understand that, because A Game Sports' Activities take place in public spaces, A Game Sports CANNOT and does not guarantee a peanut-free or nut-free environment. Should it be necessary for my child to receive medical attention/treatment while participating in any A-Game Sports Activities, I hereby give permission for the person(s) leading or directing the Activities to use their best judgment in obtaining medical attention/treatment for my child's benefit<sup>1</sup>. In that regard, I agree to release any records necessary for treatment and I authorize any necessary medical-related transportation for my child. I further give permission to any physician, nurse or health care provider ("medical professional") to render medical attention or administer medical treatment including but not limited to hospitalization, which may include injections, anesthesia and/or surgery as that medical professional deems appropriate and necessary and I authorize any medical professional to communicate with the director of A Game Sports or its designees about my child's medical condition, treatment and/or prognosis. I also give permission for the person(s) leading or directing A-Game Sports Activities to use their best judgment to otherwise render any assistance (e.g., first aid, Epi-pen, C.P.R., etc.) to my child in the event of injury or illness.

I hereby release A Game Sports, its subsidiaries, affiliates, members, managers, officers, directors, agents, representatives, sponsors and employees (referred to as the "releasees"), individually and collectively from any claims or liability to the fullest extent possible under the law. I fully understand that: attendance at A Game Sports' Activities, programs and events involve risks both known and unknown, regardless of negligence; these risks may be caused by my child's own actions or inactions, the actions or inactions of others participating in any of the Activities, programs or events, or the condition in which the Activity, program or event takes place; there may be other risks and social and economic losses either known to me or my child, or not readily foreseeable at this time; and I hereby fully accept and assume all such risks and all responsibility for losses, cost and damages incurred as a result of my child's attendance at A Game Sports programs and events including participation in any of its Activities.

I, at my sole cost and expense, shall defend, indemnify, and hold harmless A Game Sports and the other releasees (collectively, the "Indemnified Parties") from and against any and all claims, demands, losses, costs, expenses, obligations, liabilities, judgments, damages, recoveries, and deficiencies and amounts paid in settlement, including interest, penalties, expert witness fees and attorneys' fees incurred in connection therewith, that the Indemnified Parties incur or suffer that arise from, result from, or relate to my or my child's breach or alleged breach of any term, condition, warranty or representation contained in this agreement.

I also give permission for the use of any photos and videos taken to be used for publicity (i.e. commercial) purposes, purchase by family members, or for A Game Sports' website or other promotional or marketing materials.

By signing below, I acknowledge that I have read and understand the terms of this release.

Parents Signatures:

\_\_\_\_\_

Parents Printed Names:

\_\_\_\_\_

Date:

\_\_\_\_\_

Email:

\_\_\_\_\_

<sup>1</sup> Here, and going forward, "I" means on my own personal behalf, and on behalf of my child.