***"INCREDI-PLEX" IS NOT RESPONSIBLE FOR ANY PLAYER ON THE FIELD/COURT NOT ON YOUR ROSTER. ALL COACHES/MANAGERS ARE RESPONSIBLE FOR HAVING YOUR SUBS SIGN YOUR ROSTER. FAILURE TO DO SO MAY RESULT IN FORFEITURE OF GAME.***

**TEAM NAME:_____ DIVISION:_____ JERSEY COLOR:_____**

## GENERAL LIABILITY RELEASE, ASSUMPTION OF RISK, AND WAIVER OF CLAIMS

In consideration of being permitted to participate in soccer, basketball, or baseball training, exercise, athletic endeavors, or other activities (collectively "athletic endeavors") at Incredi-Plex, the undersigned participant(s) do each agree that Incredi-Plex, heirs, assigns, and agents, and any and all other persons or entities involved in its athletic endeavors, together with all subcontractors, employees, or volunteers, SHALL NO BE LIABLE for injury or death to the undersigned participant(s), their heirs, assigns and agents, or for any loss due to theft of or damage to their property or for any other consequential incidental damages caused in any manner whatsoever where any such liability is attributable to the absence of ordinary or even slight care by Operator, in the conduct of athletic endeavors.

Furthermore each of the undersigned DOES HEREBY WAIVE any and all claims or causes of action against Operator which he or she may have by reason thereof AND DOES HEREBY RELEASE AND HOLD HARMLESS Operator from any and all claims or causes of action that he or she may have from the beginning of time, now, and in the future. Each of the undersigned further agrees not to bring or cause to be brought any suit or any or any such claim or cause of action and acknowledges that the releases and waivers referred to herein shall apply regardless of whether liability is asserted on the basis of contract, strict liability, ordinary negligence or gross negligence.

I also affirm that I am voluntarily participating in athletic endeavors and using the facilities, and further acknowledge that I know, understand, and appreciate the inherent risks of such participation and use (ranging from minor injuries such as sprains, to major injuries such as heart attacks, ankle and knee injuries, to catastrophic injuries such as death or paralysis). I assume full responsibility for any and all injuries or damages from participating in athletic endeavors and facility use, which may occur to me as a result of such participation. Each of the undersigned further acknowledge that the execution of this Release, Assumption of Risk, and Waiver is continuing in nature, that it is his or her free and voluntary act, that he or she does not intend to participate in athletic endeavors Operators until or unless he or she has had full opportunity to inspect its exercise and athletic facilities and sites and to receive all information from Operators that might bear on his or her decision to participate, and that he or she is under no duress or undue influence. Additionally, by signing below, you give Sports of All Sorts permission to use your (or your child if under 18) picture for marketing needs.

Furthermore, each of the undersigned intends both that he or she be legally bound hereby, and, in the event of his or her death, that this release and waiver shall be binding on his or her estate, heirs, beneficiaries or any other successors in interest. This Release, Assumption of Risk, and Waiver shall be construed under the laws of the State of Indiana. SIGNATURE BELOW VERIFIES THAT EACH OF THE UNDERSIGNED HAS READ AND FULLY UNDERSTANDS THE FOREGOING and further certifies that the information provided in his or her entry forms and/or personal data sheets is true and complete. IN WITNESS WHEREOF, each of the participants sets forth his or her hand at the time and on the date below written.

| Player's Name (Print) | Address/State/Zip: | E-mail: | Phone: | Birth Date | Parent Signature (if under 18)/ Player Signature |
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