Northern Elite Volleyball Academy Waiver of Release and Liability

IN CONSIDERATION OF the risk of injury that exists while participating in Summer Volleyball Sessions (here-in after the Activity); and

IN CONSIDERATION OF my desire to participate in said Activity and being given the right to participate in same.

I HEREBY, for myself, my heirs, executors, administrators, assigns, or personal representatives (hereinafter collectively, "Releasor," "I" or "me" which terms shall also include Releasor's parents and guardian if Releasor is under 18 years of age), knowingly and voluntarily enter into this WAIVER AND RELEASE OF LIABILITY and hereby waive any and all rights, claims and causes of action of any kind arising out of my participation in the Activity; and

I HEREBY release and forever discharge NORTHERN ELITE VOLLEYBALL ACADEMY, located at 3291 S 300 W Bountiful Utah, 84010, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors.

Successors and assigns (collectively "Releases"), from any physical or psychological injury that I may suffer as a direct result of my participation in the aforementioned Activity.

I AM VOLUNTARILY PARTICIPATING IN THE AFOREMENTIONED ACTIVITY AND I AM PARTICIPATING IN THE ACTIVITY AT MY OWN RISK. I AM AWARE OF THE RISK ASSOCIATED WITH PARTICIPATING IN THIS ACTIVITY, WHICH MAY INCLUDE, BUT ARE NOT LIMITED TO: PHYSICAL OR PSYCHOLOGICAL INJURY, PAIN, SUFFERING, ILLNESS, DISFIGUREMENT, TEMPORARY OR PERMANENT DISABILITY (INCLUDING PARALYSIS), ECOMIC OR EMOTIONAL LOSS OR DEATH. I UNDERSTAND THAT THESE INJURIES OR OUTCOMES MAY ARISE FROM MY OWN OR OTHERS' NEGLIGENCE, CONDITIONS RELATED TO TRAVEL TO AND FROM THE ACTIVITY, LOCATION(S) NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOW AND UNKNOWN TO ME, OF MY PARTICIPATION IN THIS ACTIVITY.

I FUTHER AGREE to indemnify, defend and hold harmless the Releasees against any and all claims, suits. Or actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone On my behalf, including attorney's fees and any related costs.

I FUTHER ACKNOWLEDGE that this is a activity that involve a test of a persons physical and mental limits and may carry with it potential for death or serious injury, and property loss, I agree not to participate in the activity unless I am medically able and properly trained, and I agree to abide by the decisions of the Northern Elite Volleyball Academy official or agent, regarding my approval to participate in the activity

I HEREBY ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS "WAIVER AND RELEASE" AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. I EXPRESSLY AGREE TO RELEASE AND DISCHARGE Northern Elite Volleyball Academy AND ALL OF ITS AFFILIATES, MANAGERS, MEMBERS, AGENTS, ATTORNEYS, STAFF, VOLUNTEERS, HEIRS,

REPRESENTATIVES, PREDESSORS, SUCCESSORS, AND ASSIGNS, FROM ANY AND ALL CLAIMS, OR CAUSES OF ACTION AND I AGREE TO VOLUNTARILY GIVE UP OR WAIVE ANY RIGHT THAT I OTHERWISE HAVETO BRING A LEGAL ACTION AGAINST Northern Elite Volleyball Academy FOR PERSONAL INJURY OR DAMAGE.

To the extent that statute or case law does not prohibit releases for ordinary negligence on the part of Northern Elite Volleyball Academy, its agents and employees.

I agree that this Release shall be governed for all purposes by Utah law, without regard to any conflict of law principles. This Release supersedes any and all previous oral and written promises or other agreements.

In the event that any damage to equipment and facilities occurs as a result of my or my family's or my agent's willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any such actions of neglect or recklessness.

THIS WAIVER AND RELEASE OF LIABILITY SHALL REMAIN IN EFFECTFOR THE DURATION OF MY PARTICIPATION IN THE ACTIVITY, DURING THE INTITAL AND ALL SUBSEQUENT EVENTS OF PARTICIPATION.

Date(mm/dd/yy)	
Participants Name	
Participants Signature	
Parents/Guardians Name	
Parents/Guardians Signature	