



## Top Pick Athletics Waiver of Liability, and Indemnity Agreement

Adult Name (Please Print) \_\_\_\_\_

Child/Player Name(s) (Please Print) \_\_\_\_\_

IN CONSIDERATION for being permitted to utilize the services, and programs of Top Pick Athletics and/or for my children listed above to so participate for any purpose, including but not limited to, observation or use of facilities or equipment, or participation in any off-site program affiliated with Top Pick Athletics. The undersigned, on behalf of himself or herself and such participating children and any person representatives, heirs, and next of kin (hereinafter referred to as "the undersigned") hereby acknowledges, agrees, and represents that he or she has inspected and carefully considered such premises, equipment and facilities and/or the affiliated program and that the undersigned finds and accepts same as being safe and reasonably suited for the use or participation by the undersigned and such participating children.

In addition, the undersigned acknowledges that novel coronavirus ("COVID-19") infections have been confirmed throughout the United States, including several cases in Illinois. In accordance with the most recent guidance and protocols issued by the World Health Organization (WHO), the Centers for Disease Control and Prevention (CDC), and the Illinois Department of Health, for slowing the transmission of COVID-19, the undersigned hereby agrees, represents and warrants that neither the undersigned nor such participating children shall visit or utilize the facilities, services, and programs of Top Pick Athletics (other than exclusively online services and programs) Within 14 days after (i) returning from highly impacted areas subject to a CDC level 3 Travel Area Notice (ii) exposure to any person returning from areas subject to a CDC Level 3 Travel Health Notice, (iii) exposure to any person who has a suspected or confirmed case of COVID-19. The CDC Travel Health Network is continuously updating this list and the undersigned agrees that they are aware of this list and the countries listed. The undersigned agrees to check the CDC Travel Health Notices list (<https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>) prior to utilizing the facilities, services, and the programs of Top Pick Athletics, on a daily basis if necessary. The undersigned hereby agrees, represents, and warrants that neither the undersigned nor the participating children shall visit or utilize the facilities, services, and the programs of Top Pick Athletics if he or she (i) experiences symptoms of COVID-19 including without limitation, fever, cough or shortness of breath, or (ii) has a suspected or diagnosed confirmed case of COVID-19. The undersigned agrees to notify Top Pick Athletics immediately if he or she believes that any of the foregoing access/use restrictions may apply.

Top Pick Athletics has taken certain steps to implement recommended guidance and protocols issued by the public health agencies for slowing the transmission of COVID-19, including without limitation the access/use restrictions set forth above. The undersigned acknowledges and agrees that Top Pick Athletics may revise its procedures at any time based on updated recommended guidance and protocols issued by the Public Health Agencies and further agrees to comply with Top Pick Athletics revised procedures prior to utilizing the facilities, services and programs of Top Pick Athletics. The undersigned further acknowledges and agrees that, due to the nature of the facilities, services, and programs offered by Top Pick Athletics, social distancing of 6 feet per person among children and their caregivers is not always possible. The undersigned fully understands and appreciates both the known and potential dangers of utilizing the facilities, services, and programs of Top Pick Athletics and acknowledges that use thereof by the undersigned and/or such participating children may, despite Top Pick Athletics' reasonable efforts to mitigate such dangers, result in exposure to COVID-19, which could result in quarantine requirements, serious illness, disability, and/or death.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER TOP PICK ATHLETICS FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO, OBSERVATION OR USE OF THE FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY ON-SITE OR OFF-SITE PROGRAM AFFILIATED WITH TOP PICK ATHLETICS, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

THE UNDERSIGNED, ON HIS OR HER BEHALF AND ON BEHALF OF SUCH PARTICIPATING CHILDREN, HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE Top Pick Athletics, it's directors, officers, employees, volunteers and agents from all ability to the undersigned or such participating children and all personal representatives, assigns, heirs, and next of kin of the undersigned or participating children for any loss or damage, and any claim or demands on account of any property damage or any injury to, or an illness or the death of, the undersigned or such participating children (or any person who made contract COVID-19, directly or indirectly, from the undersigned or such participating children) whether caused by the negligence, active or passive, of Top Pick Athletics or otherwise while the undersigned or such participating children are in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with Top Pick Athletics. The undersigned expressly and knowingly waives all rights under California Civil Code section 1542, which provides: **"A general release does not extend to claims that the creditor or releasing party does not know or suspect to exist in his or her favor at the time of executing the release and that, if known by him or her, would have materially affected his or her settlement with the debtor or release party."**

THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS Top Pick Athletics, it's directors, officers, employees, volunteers and agents, and each of them, from any loss, liability, damages or cost they may incur, whether caused by the negligence, active or passive, or otherwise while the undersigned or any participating children are in, upon, or about the premises or any facilities or equipment they're in or participating in any program affiliated with Top Pick Athletics. The undersigned understands and agrees that Top Pick Athletics is not required to provide insurance to cover the undersigned or such participating children in the event they may suffer illness, injury, death, property loss, theft or damage of any sort upon, or about the premises of any facilities or equipment therein or participating in any program affiliated with Top Pick Athletics.

The undersigned agrees and acknowledges that the use of Top Pick Athletics facilities and services and participation in Top Pick Athletics programs may involve inherent danger interests, including, without limitation, the risk of physical illness or injury, death or property damage. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR, AND RISK OF ILLNESS, BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such participating children due to negligence, active or passive, or otherwise while in, about or upon the premises of Top Pick Athletics and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with Top Pick Athletics. The undersigned acknowledges that any illness or injuries that the undersigned or such participating children contract or sustain may be compounded by negligent first aid or emergency response of the Releasees and waive any claim in respect thereof.

THE UNDERSIGNED further expressly agrees that the foregoing ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the laws of the State of Illinois and that any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE CAREFULLY READ AND VOLUNTARILY SIGN THIS ASSUMPTION OF RISK RELEASE AND WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT AND FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENTS OR INDUCEMENT APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE. I AM AWARE THAT BY AGREEING TO THIS AGREEMENT I AM GIVING UP VALUABLE LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES FROM TOP PICK ATHLETICS IN CASE OF INJURY, ILLNESS, DEATH OR PROPERTY LOSS OR DAMAGE, INCLUDING, FOR THE AVOIDANCE OF DOUBT AND WITHOUT LIMITATION, EXPOSURE TO COVID-19 AT ANY TOP PICK ATHLETICS FACILITY OR PROGRAM AND ANY ILLNESS, INJURY OR DEATH RESULTING THEREFROM. I UNDERSTAND THAT THIS DOCUMENT IS A PROMISE NOT TO SUE AND RELEASE OF AN INDEMNIFICATION FOR ALL CLAIMS. IF SIGNING ON BEHALF OF A MINOR: I ALSO UNDERSTAND THAT THIS AGREEMENT IS MADE ON BEHALF OF MY MINOR CHILD(REN) AND/OR LEGAL WARDS AND I REPRESENT AND WARRANT TO TOP PICK ATHLETICS THAT I HAVE FULL AUTHORITY TO SIGN THIS AGREEMENT ON BEHALF OF SUCH MINOR(S).

**I have read and understand the terms of this Assumption of Risk, Release and Waiver of Liability, and Indemnity Agreement and agree to its terms.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_