



# Release and Waiver of Liability

Do you have of the following:

- |  |     |    |
|--|-----|----|
| 1. Symptoms of illness such as                       |     |    |
| a. Cough   | Yes | No |
| b. Shortness of breath                               | Yes | No |
| c. Fever   | Yes | No |
| d. Sore throat                                       | Yes | No |
| 2. Tested positive for COVID-19 in the last 10 days  | Yes | No |
| 3. Knowingly exposed to COVID-19 in the last 10 days | Yes | No |

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing.

I further acknowledge that The Women’s Football Alliance (WFA) and/or Team has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19.

I further acknowledge that WFA and/or Team cannot guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, staff, and other participants.

I voluntarily seek participation with the WFA and/or Team and acknowledge that I am increasing my risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending the event.

I hereby release and agree to hold the WFA and/or Team harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the WFA and/or Team, or that may otherwise arise in any way in connection with any services received from or participation in an event with the WFA and/or Team. I understand that this release discharges the WFA and/or Team from any liability or claim that I, my heirs, or any personal representatives may have against the league or team with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, participation in the event with the WFA and/or Team. This liability waiver and release extends to the WFA and Team together with all owners, partners, staff, coaches, players, and employees.

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date