

## Southeast Michigan Youth Football Association

### WAIVER/RELEASE OF LIABILITY, HOLD HARMLESS & ASSUMPTION OF RISK AGREEMENT

In consideration of being allowed to participate in any way in the Southeast Michigan Youth Football Association ("SMYFA"), including its related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in the SMYFA is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist;
2. **I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS**, both known and unknown, even if arising from negligence, and assume FULL responsibility for my and/or my child's participation;
3. I, individually and/or on behalf of my minor child, and on behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE AND HOLD HARMLESS** the Southeast Michigan Youth Football Association, its member teams, leagues and organizations, including the following: Commerce Chargers; Northville Colts; Northville Stallions; Walled Lake Braves; Livonia Blue Jays; Livonia Eagles; Livonia Falcons; Livonia Orioles; Commerce Charges Youth Football Association; Northville Youth Football Association; Livonia Junior Athletic League; USA Football; and Heads Up Football, LLC, including their officers, directors, board members, officials, agents, coaches, volunteers, other participants, and, if applicable, owners and leasers of premises used to conduct the event, for **ANY AND ALL INJURY, DISABILITY, DEATH**, or loss or damage to person or property, regardless of whether the injury or loss arises is a result of negligence.
4. As a condition of and in consideration of participation in the upcoming season, I hereby grant the SMYFA and its member teams, leagues and organizations as set forth above the **ABSOLUTE** right and permission to use my and/or my child's likeness in a photograph, video, broadcast, publish or copyright and use pictures or videos of me and/or my child in which he or she may be included in whole or in part, composite or retouched in character or form, without payment or any other consideration. I **HEREBY IRREVOCABLY AUTHORIZE** the SMYFA and its member teams, leagues and organizations and its designees to edit, alter, copy, exhibit, publish or distribute photographs and videos of me or my child for informational, educational, promotional, or publicity purposes concerning SMYFA activities, to include publication and distribution on websites and social media pages, i.e. Facebook, Twitter, Google+, Instagram, MySpace, YouTube, etc.

In addition, I **WAIVE** the right to inspect or approve the finished product, including written or electronic copy, wherein my and/or my child's likeness appears. Additionally, I **WAIVE** any right to royalties or other compensation arising or related to the use of the photographs or videos. I understand and agree that these photographs and videos will become the property of the SMYFA and/or its member teams, leagues and organizations and will not be returned. I also

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understand the photographs and videos may be used, published or distributed by third parties without any further consent or authorization from me. I **HEREBY HOLD HARMLESS AND AGREE TO RELEASE AND FOREVER DISCHARGE** the SMYFA and its member teams, leagues and organizations identified above, including their officers, directors, board members, officials, agents, coaches, volunteers, from any and all claims, demands, and causes of action which I and/or my child, or any other person acting on behalf of myself and/or my child, may have.

**I HAVE READ THIS WAIVER AND RELEASE OF LIABILITY, HOLD HARMLESS AND ASSUMPTION OF RISK AGREEMENT. I FULLY UNDERSTAND ITS TERMS AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

\_\_\_\_\_  
Player/Participant's Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Parent/Legal Guardian Printed

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date