

## Parental Waiver and Consent Form for 2025

As the parent/guardian of an ultimate player(s) under the age of 19, I have asked that my child/children be allowed to join the Vancouver Ultimate League Society (VULS) in order to participate in one or more programs or events (Game Play). I understand that the sport of ultimate, as an extreme test of a person's physical and mental limits, may involve physical risk including the potential for death, serious injury, property injury, or property loss. I hereby agree freely and expressly to assume and accept any and all injuries and losses my child/children may incur while participating.

In consideration of the VULS allowing my child/children to participate in Game Play, I, for my child/children, myself, my heirs, executors, administrators, successors and assigns, hereby release, waive and forever discharge the Vancouver Ultimate League Society, its sanctioning body and sponsors and all their respective agents, servants, contractors, representatives, directors, elected and appointed officials, successors and assigns, of and from all claims, demands, damages, costs, expenses, actions and causes of action, whether in law or in equity, in respect of death, injury, loss or damage to my child/children or my property howsoever caused, arising to or by reason of my child/children's participation in the aforementioned event, whether as a spectator, participant, competitor or otherwise, whether prior to, during, or subsequent to the current calendar year and notwithstanding that same may have been contributed to or occasioned by the negligence of any of the aforesaid.

I further hereby undertake to hold and save harmless and agree to indemnify all of the aforesaid from and against any and all liability incurred by any or all of them arising as a result of, or in any way connected with, my child's/children's participation in VULS Game Play.

**I further acknowledge that any activity involving multiple participants comes with the risk of contracting COVID-19 (Coronavirus disease) or other infectious diseases. I expressly agree that this Statement of Consent and Waiver of Liability includes my specific consent to such risk and a waiver of liability as set out above.**

I understand that the VULS and/or its authorized representatives may occasionally take pictures during VULS programs and events. I agree the VULS shall maintain ownership of such pictures and consent to the use of same, as it pertains to my child/children, for VULS promotional materials and Web content.

By completing this form, I acknowledge having read, understood and agreed to the above consent, release, waiver and indemnity for the selected individuals below:

### Player Info:

Name 1: \_\_\_\_\_

Name 3: \_\_\_\_\_

Name 2: \_\_\_\_\_

Name 4: \_\_\_\_\_

### Parent / Guardian Info:

Name: \_\_\_\_\_

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

Address: \_\_\_\_\_ (with postal code)

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

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