**DES PLAINES PARK DISTRICT**

**WAIVER & RELEASE OF ALL CLAIMS**

Please read this form carefully and be aware that when registering yourself or your minor/child/ward for participation in the program(s), you will be waiving and releasing all claims for injuries you or your minor child/ward might sustain arising from a program(s).

I recognize and acknowledge that there are certain risks of physical injury to participants in a program and I agree to assume the full risk of any injuries, including death, damages or loss regardless of severity which I or my minor child/ward may sustain as a result of participating in any and all activities connected with or associated with such program(s). I agree to waive and relinquish all claims I or my minor child/ ward may have a result of participating in any program against the District and its officers, agents, servants and employees. I do hereby fully release and discharge the District and its officers, agents, servants, and employees from any and all claims from injuries, including death, damage or loss which I or my minor child/ward may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with the activities of the program(s). I further agree to indemnify and hold harmless and defend the District and its officers, agents, servants, and employees from any and all claims resulting from injuries, including death, damages and losses sustained by me or my minor child/ward and arising out of, connected with, or in any way associated with the activities of the program(s). In the event of any emergency, I authorize District officials to secure from any licensed hospital, physician, and or medical personnel any treatment deemed necessary for me or my minor/ward’s immediate care and agree that I will be responsible for payment of any and all medical services rendered.

**Des Plaines Park District Waiver Form**

Team Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ League­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Name | Address | Phone | signature | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
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We, the undersigned, herby acknowledge that each of us has read he waiver and release form on the reverse side and each of us, individually, herby agrees to be bound by the terms of the said waiver and release.

**I certify the above to be correct, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 Signature of Team Manager/Captain  
Each player must sign their own signature, and this signature is for both the roster and waiver & Release for all claims form.**