

**USSSA “Adult Participant”**  
**Release, Sports Waiver and Permission Form**  
(For Adult Participants 18 Years of Age or Older)

**Player / Participant Information**

First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Emergency Phone Number: \_\_\_\_\_ Team Name: \_\_\_\_\_  
(MM/DD/YYYY) (M/F)

Function (select one): \_\_\_ Athlete \_\_\_ Coach \_\_\_ Other \_\_\_\_\_  
(Please specify function above, e.g., scorekeeper,

**Event Information**

| Name of Event | Event Dates | Location |
|---------------|-------------|----------|
|               |             |          |

Event Host: \_\_\_\_\_

Event Sport/Activity involved: \_\_\_\_\_

**TERMS AND CONDITIONS OF PARTICIPATION (Read both pages before signing)**

In consideration of my being permitted to participate in the Event and sport/activity referenced above (collectively the “Event Sport/Activity”), wherever the Event Sport/Activity may occur, I hereby attest that, after reading the Sports Waiver and Permission Form completely and carefully, I acknowledge that my participation in the Sport/Activity is entirely voluntary, and I further understand and agree as follows:

**ASSUMPTION OF RISK/LIABILITY RELEASE AND INDEMNITY:** I understand that incidental participation in the Event Sport/Activity, I may be engaging in activities that involve the risk of serious personal injury, illness, permanent disability, dismemberment, and death, and that such participation may also involve the risk of severe economic and property loss and damage. I understand that these risks may result from the negligence and failure to act of myself and others (including, but not limited, to other individuals in attendance at the Event Sport/Activity and the Released Parties, as defined below) and from the condition of any property, facilities or equipment used. I also understand that there may be risks involved that are not known to me and the Released Parties, and may not be foreseen or reasonably foreseeable by any of us at this time or at the time of the Event Sport/Activity. I agree to assume all of the foregoing risks, which risks may include, among other things, muscle injuries and broken bones, as well as the risk of any negligence by other participants or Released Parties, and the risk of injury caused by the condition of any property, facilities or equipment during the Event Sport/Activity, and accept personal responsibility for any injury (including, but not limited to, personal injury, disability, dismemberment and death), illness, damage, loss, claim, liability, or expense, of any kind or nature, that I or my property may suffer arising out of or in connection with my participation in the Event Sport/Activity. On my own behalf, and on behalf of my heirs, executors, administrators and next of kin, I hereby release, covenant not to sue, and forever discharge the Released Parties of and from all liabilities, damages, actions, damages, costs or expenses of any nature (“Claims”) arising out of or in any way connected with my participation in the Event Sport/Activity, and further agree to indemnify and hold each Released Party harmless from and against any and all such Claims including but not limited to, all attorneys’ fees and disbursements.

\_\_\_\_\_ and \_\_\_\_\_, and their respective parent, subsidiary, affiliate, related companies; the Event Sport/Activity Host, Sponsors and/or Charities having a presence at the Sport/Activity; the Event Sport/Activity contractors and their respective parent, subsidiary, affiliate and companies; and all officers, directors, employees, agents, contractors, sub-contractors, representatives, successors, assigns, and volunteers of each and all of the foregoing entities.

**PHYSICAL CONDITION/MEDICAL AUTHORIZATION:** I hereby certify that I am physically fit for participation in the Event Sport/Activity, have the skill level required in connection with the Event Sport/Activity, and have been advised otherwise. I agree that before I participate in the Event Sport/Activity, I will inspect all facilities and equipment. In connection with any injury sustained or illness or medical conditions experienced during my attendance in connection with the Event Sport/Activity, I authorize any emergency first aid, medical treatment or surgery deemed necessary by the attending medical personnel if I am not able to act on my own behalf. Additionally, I authorize medical treatment for me, at my cost, if the need arises; how I acknowledge that the Released Parties shall have no duty, obligation or liability arising out of the provision of medical treatment.

**EQUIPMENT AND FACILITIES INSPECTION:** I will immediately advise the Event Sport/Activity manager of any unsafe condition that I observe, and will refuse to participate in the Event Sport/Activity until all unsafe conditions observed by me have been remedied.

**PUBLICITY RIGHTS:** I further grant the Released Parties the right to photograph, record and/or videotape and further to display, edit, use and/or otherwise exploit my name, face, likeness, Event Sport/Activity and standings (as more fully described below), voice and appearance in all media, whether now known or hereafter devised (including, without limitation, in computer or other device applications, online webcasting, television programming, including broadcast on any and all media platforms), in motion pictures, newspapers, and magazines, and in all forms including, without limitation, digitized images or video, throughout the universe in perpetuity, whether for advertising, publicity, or promotional purposes, including, without limitation, publication and use of Event Sport/Activity result and standings (including but not limited to name, number if applicable, age, times if applicable, gender, "hometown", or other standard Event Sport/Activity information) without compensation, residual obligations, reservation or limitation, or further approval, and I agree to indemnify and hold harmless the Released Parties for any Claims associated with such grant and right to use my name and likeness. The Released Parties are, however, under no obligation to exercise any rights granted herein.

**GOVERNING LAW:** This Waiver and Permission Form will be governed by the laws of the State of Florida. Any legal action relating to or arising out of this Waiver and Permission Form will be commenced exclusively in the Circuit Court of the Eighteenth Judicial Circuit in and for Brevard County, Florida (or if such Circuit Court does not have jurisdiction over the subject matter thereof, then to such other court sitting in such county and having subject matter jurisdiction), AND I SPECIFICALLY WAIVE THE RIGHT TO TRIAL BY JURY.

**ATTESTATION:** By signing my name below, I certify that I have read the BOTH PAGES of this Release, Waiver and Permission Form document. My signature below certifies my understanding of and agreement to the above policies. A photocopy of this document is as valid as the original.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date