Fast Functional Feet

Waiver of Liability, Assumption of Risk, and Indemnity Agreement

Waiver: In consideration of being permitted to join and/or participate in the use of the services, training, and other programs at Fast Functional Feet ("3F") I, for myself, my heirs, personal representatives or assigns, and on behalf of and for my children, **do hereby release, waive, discharge, and covenant not to sue** 3F or its employees, and agents, including but not limited to Boyah Kaar and Christian Raymundo, from liability **from any and all claims including the negligence of 3F or its employees and agents**, resulting in personal injury, accidents or illnesses, and property loss arising from, but not limited to, my, and my children's membership and participation in activities at 3F.

Date	Signature of Parent/Guardian of Minor	Printed Name of Parent/Guardian

Printed Name of Minor	Date of Birth of Minor

Email	Phone

Address

Assumption of Risks: Participation in many activities at 3F carries with them certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary, but the risks range from: (1) minor injuries such as scratches, bruises, and sprains to (2) major injuries such as eye injury or loss of sight, joint or back injuries, sprains, heart attacks, and concussions to (3) catastrophic injuries including paralysis and death.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in the sports performance and use of the soccer fields leased by 3F. I hereby **assert that my child's participation is voluntary and that I knowingly assume all such risks.**

I also understand that is my responsibility to transport my child to and from 3F events and training, and that it is my responsibility to remain at training during the training sessions in the event my child needs medical care or assistance. I understand that 3F does not have medical assistance on staff or standing by, and the coaches at 3F do not have medical training. I further understand that the fields used by 3F are leased from third parties, and 3F or its agents are not responsible for their upkeep, maintenance or safety.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and **understand that I am giving up substantial rights, including my and my family's right to sue**. I acknowledge that I am signing the agreement on behalf of myself and my family freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

Date	Signature of Participant or Parent/Guardian