

**ST. GERTRUDE BULLDOGS ATHLETICS BOOSTERS
GENERAL RELEASE AND WAIVER OF LIABILITY**

I hereby acknowledge that I am voluntarily allowing my minor child(ren) to participate in sports activities organized by the St. Gertrude Bulldogs Athletic Boosters Organization. I understand that these activities involve inherent risks, including but not limited to bodily injury, property damage, and death, which may occur as a result of participation. Therefore, I agree to the following terms:

1. RELEASE AND WAIVER OF LIABILITY: I hereby release and forever discharge the St. Gertrude Athletics Boosters organization, its directors, officers, agents, employees, and volunteers (collectively, the "Released Parties"), from any and all liability, claims, demands, and causes of action that I may have now or in the future, arising from any loss, damage, or injury, including death, that may be sustained by me, my participant child(ren), or to any property belonging to me, whether caused by the negligence of the Released Parties or otherwise.

2. ASSUMPTION OF RISK: I understand and acknowledge that participation in sports activities organized by St. Gertrude Athletic Boosters involves inherent risks, including but not limited to bodily injury, property damage, and death. I voluntarily assume all risks associated with my child(ren)'s participation in these activities.

3. INDEMNIFICATION: I agree to indemnify, defend, and hold harmless the Released Parties from any and all claims, demands, and causes of action, including attorney's fees and costs, arising out of or related to participation in sports activities organized by St. Gertrude Athletic Boosters.

4. MEDICAL TREATMENT: I authorize the St. Gertrude Athletic Boosters organization, its agents, employees, and volunteers, to obtain or provide medical treatment for my child(ren) in the event of any injury, illness, or other medical condition that may occur during participation in the sports activities.

5. ACKNOWLEDGEMENT OF UNDERSTANDING: I hereby certify that as the parent or legal guardian of my child(ren), I have legal responsibility and authority to sign this release and waiver of liability on behalf of my minor child(ren). I further certify that I have read this release and waiver in full, understand its terms, and understand that substantial rights will be given up by signing it, and that it is signed voluntarily, without duress or coercion.

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____

Participant Name(s): _____

Date: _____