EVERETT SOCCER ARENA ROSTER/WAIVER FORM

SEASON	DIVISION	DATE			
TEAM NAME	MANAGER	HM PHON	1E	WK PHONE	_
MANAGERS ADDRESS	CITY		ZIP		
NAME	ADDRESS	PHONE NUMBER	D.O.B	SIGNATURE	AMT PAID

RELEASE AND WAIVER ASSUMPTION OF ALL RISKS

The undersigned, desiring to participate in soccer at and use the indoor facilities at the Everett Soccer Arena, a *d/b/a* of ISM Corporation and Everett Soccer Association [Arena], [collectively "activity"], and recognizing that participation may involve risk of serious and permanent physical injury and/or death to personal property, the undersigned ["participate"] as an inducement to the Arena to allow such participation and use, and recognizing and agreeing that the Arena will rely on this document, hereby acknowledges and agrees as follows:

ON BEHALF OF MYSELF, MY SPOUSE, MY CHILD (AS APPLIICABLE), HEIRS, ESTATE, AND/OR ANY PARTICIPATION FOR WHICH I REPRESENT THAT IAM LEGALLY AUTHORIZED TO SIGN FOR AND BIND, THE UNDERSIGNED HEREBY WAIVES, RELEASES, INDEMNIFIES AND AGREES TO HOLD HARMLESS, AND WILL DEFENDAS DEMANDED, ARENA AND ITS EMPLOYEES, OFFICERS, DIRECTORS, SHAREHOLDERS, AGENTS, INVITEES AND INDEPENDENT CONTRACTORS FROM AND WITH REGARD TO ANY AND ALLIABILITY, CLAIMS, WARRANTIES, PROMISES, REPRESENTATIONS, DUTIES OF INSPECTION OR NOTICE, JUDGEMENTS, RESPONSIBILITY, OBLIGATIONS, AWARDS, DECISIONS, ACTIONS, OR OTHER LEGAL OR RELATED PROCEEDINGS SUFFERED BY, ACCRUING TO, VESTED IN, OR OCCURRING TO THE UNDERSIGNED, OR ANY MINOR CHILD THEREFORE FOR WHICH THE UNDERSIGNED HAS HEREIN BELOW SIGNED, FROM OR OUT OF ANY LOSS, INJURY, DAMAGE, OF ANY KIND WHATSOEVER ARISING DURING OR AS A RESULT OF THE ACTIVITY TO THE ABOVE SIGNED, ANY PERSONFOR WHOM I SIGN, OR ANY OTHER PARTICIPANT

I ACKNOWLEDGE THAT (A) PARTICIPATION IN THE PLANNED ACTIVITY INVOLVES A HIGH RATE OF PHYSICAL EXERCISE, CONTACT AND EXERTION; (B) SUCH ACTIVITY CAN INVOLVE A RISK OF TEMPORARY OR PERMANENT INJURY OR DAMAGE: © THE ACTIVITY WILL BE UNSUPERVISED AND WITHOUT INSTRUCTION OF ANY KIND; (D) THE PREMESIS/ARENA HAVE NOT BEEN INSPECTED FOR LATENT DEFECTS OR DANGERS OF ANY KINDAND THE ABOVE SIGNEDHAS INSPECTED THE PREMESIS/ARENA AND HAD DETERMINED SAME SATISFACTORY AND SAFE FOR THE INTENDED ACTIVITY AND ASSUMES ALL RESPONSIBILITY FOR SUCH INSPECTION AND WAIVES ANY NOTICE WITH REGARD TO SAME FROM THE ARENA AND OTHERWISE; (E) THE PARTICIPANT AND MYSELF ASSUME ALL OF THE RISK ASSOCIATED WITH SUCH PARTICIPATION, AND ANY DAMAGE OR INJURY OR LOSS OF ANY KIND RESULTING THERE FROM IS SPECIFICALLY INCLUDED IN THIS WAIVER AND RELEASE FORM

I HEREBY COVENANT AND GUARANTEE THAT I AM OVER THEAGE OF 18 YEARS; AND IF NOT OVER SUCH AGE, THE SIGNATURE APPEARING ON MY BEHALF IS MY LAWFUL PARENT OR GUARDIAN, I WILL BE RESPONSIBLE FOR AND MAKEPAYMENT OF ANY DAMAGE OCCASIONED TO THE ARENA OR EQUIPMENTAS A RESULT OF MY PARTICIPATION.