

2016-17 Lanier Volleyball Club Programs
Waiver and Release of Liability, Medical Waiver, Standards Agreement and Photo/ Video Release

Waiver and Release of Liability

I acknowledge that volleyball or any sporting event is an extreme test of a person's physical and mental limits and that my participation in a volleyball event can cause potential death, serious injury, or property damage. With a full understanding of the potential risks, I HEREBY ASSUME THE RISKS OF PARTICIPATING OR OFFICIATING IN ANY AND ALL VOLLEYBALL EVENTS AND ACTIVITIES ASSOCIATED WITH LANIER VOLLEYBALL CLUB.

I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns: a) I WAIVE, RELEASE, AND DISCHARGE from any and all claims or liabilities for death or personal injury or damages of any kind, EXCEPT THAT WHICH IS THE RESULT OF GROSS NEGLIGENCE AND/OR WANTON MISCONDUCT OF PERSONS OR ENTITIES LISTED BELOW, which arise out of or relate to my traveling to and from or my participation in any and all volleyball events associated with Lanier Volleyball Club, THE FOLLOWING PERSONS OR ENTITIES: Lanier Volleyball Club, Inc. and its affiliate programs, Lanier Volleyball Club, Inc.'s program activity locations to include gymnasiums, or other locations associated with activities and gatherings participated in under Lanier volleyball Club activities, tournament directors, coaches, volunteers, sponsors, and the officers, directors, employees, representatives, and agents of any of the above; b) I AGREE NOT TO SUE any of the persons or entities listed above for any of the claims or liabilities that I have waived, released or discharged herein; and c) I INDEMNIFY AND HOLD HARMLESS the persons or entities mentioned above from any claims made or liabilities assessed against them as a result of my actions.

Medical Waiver

I hereby give permission for any LVC staff or coach to seek during the period of LVC activities, appropriate medical attention, for the medical attention to be given, and to receive the medical attention in the event of accident, injury or illness. I will be responsible for any and all costs of medical attention and treatment.

Adherence to Standards Agreement

I understand and agree to abide by all LVC policies, rules, and regulations and to all LVC Programs' and associated activities' rules and regulations.

Photo/Video Release.

I hereby authorize LVC to use, reproduce, and/or publish photographs, video, other digital representations, and/or audio that may pertain to me, including my image, likeness and/or voice (collectively "Works"). I hereby authorize LVC to edit, alter, copy, exhibit, publish or distribute the Works for any lawful purpose. I waive any right to inspect or approve the finished product, including written copy, which may be created in connection therewith. I also agree that by signing below I release LVC any and all of its representatives from any and all monetary obligations or payments to me or any of my authorized representatives for use of video, films, photographs, image, other digital representation and/or voice of myself. I understand that this material may be used in various publications, public affairs releases, recruitment materials or for any other purpose consistent with the mission of LVC. This material may also appear on one or more LVC websites. This authorization is irrevocable and I hereby hold harmless and release and forever discharge LVC and its representatives from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

By electronically agreeing to above Waiver and Release of Liability, Medical Waiver, Photo Release and Agreement, I understand that said electronic agreement serves as an electronic signature, regardless of age dated at the completion of the associated registration. I certify that I am above 18 years of age as participant an/or are the parent or guardian of said participant. In the instance of executing the above waiver and releases of Liability and Medical Care, I represent that I have legal capacity and authority to act for and on behalf of the minor named in the associated registration and on behalf of the minor named herein, and I agree to indemnify and hold harmless the persons or entities named in the Waiver and Release of Liability, Medical Waiver, Photo Release and Agreement for any claims or liabilities assessed against them as a result of any insufficiency of my legal capacity or authority to act for and on behalf of the minor in the execution of the Waiver and Release. I fully consent to my child's participation in any and all LVC events and activities.