

ACSC Liability Waiver Form

(A copy of this form must be on file in the league office)

*This **Liability Waiver Form** must be completed, and signed by the parent or guardian for each student-athlete (including cheerleaders) before participation in an ACSC athletic practice, game, activity, contest, or event. The original must be on file in the school office and a copy must be on file with the ACSC.*

PARENT/GUARDIAN RELEASE

FOR AND IN CONSIDERATION OF the mutual promises, covenants, conditions, representations, and warranties contained herein, and for other good and valuable consideration, the receipt and legal sufficiency of which are hereby acknowledged, it is agreed as follows:

The undersigned hereby releases and forever discharges the Alabama Christian Sports Conference (ACSC), along with all of its agents, volunteers, directors, officers, assigns, and attorneys, from any and all claims, demands, actions, causes of action or suits arising out of any injuries, known or unknown, which have resulted or may in the future result from any ACSC sponsored athletic game, activity, contest, or event.

The undersigned hereby assumes all risk of injury associated with any such ACSC athletic game, activity, contest, or event and fully indemnifies and holds harmless the ACSC along with its agents, volunteers, directors, officers, assigns, and attorneys from and against each and every liability, loss, cost, damage, and expense, including attorney's fees, which the ACSC along with its agents, employees, directors, officers, assigns, and attorneys may incur as a result of any ACSC sponsored athletic game, activity, contest, or event. The ACSC does not have employees. All persons associated with the ACSC are volunteers.

This liability waiver/release applies to the following student-athlete:

STUDENT'S NAME:

First Middle Last

HOME ADDRESS:

_____/_____/_____
Street City State Zip

who is currently enrolled in the following ACSC member school:

SCHOOL NAME:

Southern Christian Athletics

SCHOOL ADDRESS:

PO BOX 1821 / OPELIKA / AL / 36801

Street City State Zip

This ____ day of _____, 20____

Parent/Guardian's Signature

Parent/Guardian's Printed Name