

**PYSL - Blast SC**  
**COMMUNICABLE DISEASE ACKNOWLEDGMENT,**  
**RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT**

In consideration of being allowed to participate in any way in PYSL, Inc. and Blast SC programs (hereinafter PYSL, Inc. and Blast SC shall be referred to as “Blast SC”), including any related events and activities, I the undersigned, acknowledge, appreciate, and agree that:

I am aware that infections related to the virus “severe acute respiratory syndrome coronavirus 2” (SARS-CoV-2), which is responsible for Coronavirus Disease (COVID-19) (hereinafter SARS-CoV-2 and COVID-19 shall be referred to as “COVID19”) have been confirmed throughout the United States, including many cases in California.

I am aware there are risks of exposure, directly and/or indirectly, to all communicable diseases, including, but not limited to, COVID-19 and/or any mutation, or variation, thereof.

I am further aware that participating and/or allowing my child(ren) to participate in Blast SC related activities will present a real and direct risk that me and/or my child(ren) may, and in some cases will, be exposed to COVID19, as well as other viruses and/or communicable diseases. Such activities include, but are not limited to, Blast SC events and meetings, formal and informal practice activities, sanctioned and/or unsanctioned soccer games, scrimmages, as well as any other Blast SC soccer activities where groups of two (2) or more may congregate.

I have read and am familiar with the appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette per Center for Disease Control and Prevention (CDC) guidelines and the California Department of Health (CDPH) requirements and will abide by such guidelines:

- a) CDC: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>
- b) CDPH: <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/ncov2019.aspx>

I willingly agree to comply with the stated and customary terms and conditions for participation in events and activities of BLAST SC as regards to protection against infectious diseases. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.

I, for myself and on behalf of my heirs, guardian(s), child(ren), assigns, employees, personal representatives and/or agents, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS BLAST SC, as well as its officers, coaches, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct any BLAST SC event from any and all loss(es), claim(s), demand(s), and/or liability arising out of, either directly or indirectly, any ILLNESS, INJURY, DISABILITY OR DEATH I may suffer, whether caused by negligence, active or passive, or otherwise, to the fullest extent permitted by California law. The undersigned acknowledges that any illness or injuries that the undersigned or such participating child(ren) contract or sustain may be compounded by negligent first aid or emergency response and waive any claim in respect thereof.

I, the undersigned hereby agree, represent, and warrant that neither the undersigned nor my participating child(ren) shall participate or utilize in any Blast SC program within 14 days after: (i) returning from highly impacted areas subject to a CDC Level 3 Travel Health Notice, (ii) exposure to any person returning from areas subject to a CDC Level 3 Travel Health Notice, or (iii) exposure to any person who has a suspected or confirmed case of COVID-19. The CDC Travel Health Network is continuously updating this list and the undersigned agrees that they are aware of this list and the countries listed. The undersigned agrees to check the CDC Travel Health Notices list (<http://www.cdc.gov/coronavirus/2019->

[ncov/travelers/index.html](http://ncov/travelers/index.html)) prior to participating in any Blast SC program, on a daily basis if necessary. The undersigned hereby agrees, represents, and warrants that neither the undersigned nor their participating child(ren) shall visit, observe, or participate in any Blast SC program or related activity if he or she: (i) experiences symptoms of COVID-19, including, without limitation, fever, cough, or shortness of breath, or (ii) has a suspected or diagnosed/confirmed case of COVID-19. The undersigned agrees to notify the President of Blast SC at [president@pyslsoccer.org](mailto:president@pyslsoccer.org) immediately if he or she believes that any of the foregoing access restrictions may apply.

I HAVE CAREFULLY READ THIS ACKNOWLEDGMENT, RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT (“AGREEMENT”), AND I FULLY UNDERSTAND ITS TERMS AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. I FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENTS, OR INDUCEMENT APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE.

I AM AWARE THAT BY AGREEING TO THIS AGREEMENT I AM GIVING UP VALUABLE LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES FROM BLAST SC IN CASE OF ILLNESS, INJURY, DEATH, OR PROPERTY LOSS OR DAMAGE, INCLUDING, FOR THE AVOIDANCE OF ANY DOUBT AND WITHOUT LIMITATION, EXPOSURE TO COVID-19 AND ANY ILLNESS, INJURY, OR DEATH ARISING THEREFROM. I UNDERSTAND THIS IS A PROMISE NOT TO SUE AND A RELEASE OF AND INDEMNIFICATION FOR ALL CLAIMS.

I FURTHER AGREE AND ACKNOWLEDGE THAT I HAVE BEEN PROVIDED AN OPPORTUNITY TO READ AND REVIEW THE FOREGOING AGREEMENT WITH COUNSEL OF MY CHOOSING AND THAT I SIGN THIS WAIVER VOLUNTARILY AND WITHOUT DURESS.

SHOULD ANY PORTION OF THIS AGREEMENT BE DEEMED UNENFORCEABLE BY A COURT OF COMPETENT JURISDICTION I AGREE THAT THE BALANCE SHALL CONTINUE IN FULL FORCE AND EFFECT AND I AGREE TO WORK WITH THE RELEASOR TO MODIFY THIS AGREEMENT SO AS TO MAKE THIS AGREEMENT ENFORCEABLE SO AS TO RELEASE BLAST SC FROM ANY AND ALL LIABILITY AS OUTLINED HEREIN.

X \_\_\_\_\_

Participant’s Signature

Date

FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child’s involvement or participation in any Blast SC programs as provided above and to the fullest extent permitted by law.

X \_\_\_\_\_

Parent/Guardian Signature

Date

Emergency Phone Number(s)