

Indian Association Of Sacramento (IAS)

Sacramento Champions Cricket League (SCCL)

AGRASEN CUP Tournament

TEAM WAIVER FORM

ABSOLUTE WAIVER AND RELEASE OF LIABILITY

TEAM NAME:

SEASON: 2023

EACH AND EVERY PARTICIPANT IN THE INDIAN ASSOCIATION OF SACRAMENTO (IAS) CRICKET TOURNAMENT IS REQUIRED TO READ AND SIGN THIS DOCUMENT. SIGNING THIS DOCUMENT SERVES AS PROOF THAT YOU HAVE READ AND ACCEPTED THE TERMS AND CONDITIONS OUTLINED HEREIN. YOUR REFUSAL TO SIGN THIS DOCUMENT WILL PREVENT YOUR PARTICIPATION IN ANY IAS ACTIVITIES.

Under no circumstances will a player be allowed to participate without submission of this waiver form. Participants under the age of 18 are required to submit this waiver form signed by a parent (one or both) or a legal guardian.

In consideration of being allowed to participate in any way in IAS programs, and related events and activities, I, the undersigned hereby:

1. Each player in the team has reviewed and agrees to abide by the COVID-19 guidance for Youth and Recreational Adult Sports issued by Sacramento County Public Health:
<https://criIASubs.com/CIAS/document.doc?documentId=59&clubId=2350>
2. Each player in the team has reviewed and agrees to abide by the Facility usage guidance for recreational Sports issued by Cordova Recreation & Park District:
<https://criIASubs.com/CIAS/document.doc?documentId=60&clubId=2350>
3. Acknowledge that such activities are potentially hazardous and pose a risk of grave injuries that may be significant and can result in permanent disability or death and that I assume such risks.
4. Agree to release, hold harmless, and not sue Ekal Vidyalaya Foundation of USA, IAS (Indian Association of Sacramento), ACA (Agrawal Community of the Americas), Curry Pizza House, HariTaxPro, Chaat Paradise, Bakery Bites, All Sports Inc, Shikha Photography, Curry Club, ShankarLoans.com, or any Sponsors of SCCL directly or indirectly, its Officials, Board of Directors, representatives, committee members, agents, and SCCL Players, on account of any injury or claims of injury to a person while participating in or traveling to and

from IAS-SCCL activities. I also agree that signing this form shall also bind my spouse and relatives, to release, hold harmless, and not sue IAS and SCCL Sponsors, its officials, Board of Directors, representatives, agents or SCCL Players, or any direct or indirect SCCL Sponsors, and its officials.

5. Agree and consent to the use of my name, voice, picture, image, likeness, performance, video, and/or motion pictures of myself and/or my property by the IAS and/or its Officials, Board of Directors, representatives, and agents. I hereby grant permission to the IAS and/or its Officials, Board of Directors, representatives, committee members and agents to use, and/or reproduce my name, voice, picture, image, likeness, performance, video and/or motion pictures of myself and/or my property and that you may distribute and exhibit these throughout the world without charge or restriction. I hereby release the Ekal Vidyalaya Foundation of USA, IAS (Indian Association of Sacramento), ACA(Agrawal Community of the Americas), Curry Pizza House, HariTaxPro, Chaat Paradise, Bakery Bites, All Sports Inc, Shikha Photography, Curry Club, ShankarLoans.com, or any Sponsors of SCCL directly or indirectly, its Officials, Board of Directors, representatives, committee members and agents, SCCL Players from any and all claims for damages based on the use of said name, voice, picture, image, likeness, performance, video and/or motion pictures.
6. Acknowledge and accept that automobiles/mode of transportation used in conjunction with IAS activities shall not be covered under the property damage liability insurance provided by IAS. I understand that I am required to carry auto liability insurance as required by the state where the automobile is registered.
7. Attest that I am in good physical health and have no existing physical disability, illness, or condition of any type that may be aggravated by the physical requirements of participating in IAS activities.
8. Acknowledge that I have read and fully understand IAS's by-laws and code of conduct documents. I agree to abide by the laws, rules, and regulations set forth by IAS and accept any disciplinary action that may be handed down by IAS officials pursuant to any behavior on my part that may, at IAS's sole discretion, warrant such an action.
9. Understand that the league has zero tolerance for fighting and further understand that if I should engage in a physical altercation, I will be immediately suspended for the remainder of the league. I also understand that there are no refunds.
10. Acknowledge and accept that submission of this form is an integral requirement and pre-condition of participation in any IAS activity.
11. Applicable to the Team Captain: If there is any participant in my team who participates in the league without signing this document, I will accept responsibility on his or her behalf and abide by the above conditions (1-8) on Page-1 and Page-2.

I acknowledge that I am over the age of 18 years, have read this agreement, and fully understand its terms, and I will give up substantial rights by signing it. I have signed this waiver form freely and without any inducement or assurance of any nature, and I intend it to be a complete and unconditional release of liability to the maximum extent permitted by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Team Name: _____

Team Captain: _____

Sr. No.	Name	Address	Zip Code	Phone	Signature
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