



Release and Waiver of Liability

I hereby attest that I am fully cognizant of the risks involved in the sport of kickball and agree to abide by and adhere to the published kickball rules of Community Foundation of Southern Maryland at all times during my participation in the sport of kickball. I further attest that I do not suffer from any heart, lung or other medical condition or disease that might in any way hinder or prevent me from participating in the sport of kickball.

In consideration of my participation in the sport of kickball, I agree to indemnify and hold harmless Community Foundation of Southern Maryland and its officers, directors, employees, members, subsidiaries, agents, successors, and assigns from and against any and all liability that may arise, directly or indirectly, now or in the future, by reason of any injury, damage, loss, or expense incurred in connection with my participation in the sport of kickball, including that caused solely or in part by the fault (including but not limited to negligence, gross negligence, and/or recklessness) of the above-named parties. This Release and Waiver of Liability shall be binding on my heirs, executors, administrators, successors, and assigns.

I further attest that I have adequate health coverage to handle any injury that may occur during Community Foundation of Southern Maryland kickball games.

I HAVE READ AND UNDERSTAND THIS RELEASE AND ENTER INTO IT IN CONSIDERATION OF THE OPPORTUNITY TO PARTICIPATE IN THE SPORT OF KICKBALL.

Printed Name _____

Address _____

City _____ **State** _____ **Zip** _____

Phone (_____) _____

Email _____

Signature _____ **Date** _____

**Thank you for your support and dedication to volunteer.
We strive to help make our community the best place to live and give.**