

## Velocity Football Academy, Inc. Participation Authorization, Injury Waiver & General Release Form



Welcome to Velocity Football Academy, Inc., herein after referred to as "VELOCITY". As a participant in the 2019 training program(s) with VELOCITY, herein after referred to as "the training", I acknowledge that participation in the training exposes me to a possible risk of personal injury. I, hereby release VELOCITY, related sponsors, and its officers, directors, employees, agents, licensees, subsidiaries, consultants, independent contractors, and affiliates from any and all liability from property damage, personal injuries or other claims arising from or in connection with my participation in the training including claims that are known and unknown, foreseen and unforeseen, future or contingent.

I covenant that I will not now or at any time in the future, directly or indirectly, commence or prosecute any action, suit or other proceeding against said companies, sponsors and officers, directors, employees, agents, licensees, subsidiaries, consultants, independent contractors and affiliates, arising out of or relating to the actions, causes of action, claims and demands hereby waived, released or discharged by me.

For good and adequate consideration, which I acknowledge I have received, I hereby grant, release, and quitclaim to VELOCITY the right and authority to use, reproduce, and distribute, quoted material, my photograph, likeness, recorded voice or videotaped filmed appearances for training, promotional and advertising purposes or programs as VELOCITY in its sole discretion will deem appropriate. I acknowledge that I have read and fully understand this Player Authorization, Injury Waiver and General Release Form. This agreement will bind me, my spouse, my children, legal representatives, heirs, successors and assigns.

DATE:	
PARTICIPANT PRINTED NAME:	
PARTICIPANT SIGNATURE:	
STREET ADDRESS:	
CITY, STATE, ZIP:	
EMAIL:	
PHONE:	
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PARENTAL CONSENT (To be filled out if p	articipant is under the age of 18)
behalf of Subject, agree to be bound by th signed by Subject. Parents also represent, Subject and (is)(are) Subject's legal guar afterwards, Parents will use all reasonable et Waiver and General Release Form signed by	("Subject"), hereby consent to affirm, and, or the Injury Waiver and General Release Form attached hereto which has been warrant and agree that Parents (is)(are) entitled to the care and custody ordian(s); that during the minority of Subject and for a reasonable time afforts to prevent Subject from attempting to or actually disaffirming the Injury of Subject; that Parents hereby acknowledge that Parents have read the Injury atisfied that it is fair and equitable for the benefit of Subject; and that Parents
DATE:	
NAME AND	RELATIONSHIP TO SUBJECT: (please print)
NAME (PRINT):	RELATIONSHIP:
PARENT SIGNATURE:	
PARENT CELL #:	
PARENT EMAIL:	