WAIVER AND RELEASE

In consideration of being permitted to participate in the Arizona Storm tryouts, clinics, open gyms and club season. I hereby waive, release, discharge, and agree to indemnify the Arizona Region, USA Volleyball and Arizona Storm Volleyball Club and their owners, officers, agents, employees, and volunteers from any and all claims for personal injury, death, or property damage which may accrue as a result of my presence at the tryouts, clinics, open gyms and club season. This agreement is intended to discharge in advance Arizona Storm Volleyball Club, Arizona Region, USA Volleyball and Madison # 1 Middle School from and against any and all liability, claims, demands, and causes of action arising out of or related to any loss, damage, or injury that may be sustained by the undersigned, including anything that may arise out of negligence on the part of Arizona Storm VBC, Arizona Region and USA Volleyball, Madison # 1 Middle School, Westwood High School including its own sole or active negligence.

I understand that participating in the tryouts, clinics, open gyms and club season can include physical and/or strenuous exercise or activity and I certify that I am physically able to participate in any such activity in the tryout, clinic, open gym or club season. I understand that serious accidents can occur during volleyball and those participants in and spectators of such activities may sustain personal injuries as a consequence thereof. Knowing the risks involved, nevertheless I request permission to be in the tryouts, clinics, open gyms and club season for all activities and hereby agree to assume any and all risks of injury or death and to release and hold harmless Arizona Storm VBC, Arizona Region, USA Volleyball, Madison # 1 Middle School, and Westwood High School who through negligence, carelessness, or other acts or omissions might otherwise be liable to me. I further understand and agree that this waiver, release, and assumption of risk are binding on my heirs, assigns, and potential subrogees, including any insurance company and/or HMO.

I further agree to indemnify and to hold harmless Arizona Storm VBC, Arizona Region, USA Volleyball and Madison # 1 Middle School from any loss, liability, damage, or expense, including attorney fees, that it may incur as a result of any injury and / or property damage that I may sustain or cause while in the tryouts and I further agree to reimburse any expense that Arizona Storm VBC may incur if any litigation arises because of any claim made by me or another injured by my actions in the tryouts.

I HAVE CAREFULLY READ THIS WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A FULL RELEASE OF LIABILITY OF ARIZONA STORM VBC, ARIZONA REGION, USA VOLLEYBALL AND MADISON # 1 MIDDLE SCHOOL AND, BY MY SIGNATURE INTENTIONALLY RELINQUISH ANY RIGHTS AS SET FORTH ABOVE.

_____	_____	_____
Printed Name of Participant	Signature	Date

I, as parent/guardian with legal responsibility for this participant, authorize Arizona Storm VBC to administer first aid treatment for any injuries to the participant during the tryouts, clinics, open gyms and club season. If the injury requires emergency treatment, I authorize Arizona Storm VBC to summon any or all professional emergency personnel to attend, transport and treat the participant. I understand that I and / or my medical insurance are solely responsible for all bills and claims that may be filed as a result.

I consent and agree to the release on behalf of the participant, as provided above, and, for myself, my heirs, assigns, and potential subrogees, I release and agree to indemnify and hold harmless Arizona Storm VBC, Arizona Region, USA Volleyball, Madison # 1 Middle School, and Westwood High School from all liabilities incident to my minor child's participation in the tryouts, clinics, open gyms and club season as provided above, even if arising from any negligence on the part of Arizona Storm VBC, Arizona Region, USA Volleyball, or Madison # 1 M S to the fullest extent permitted by law. I have instructed the minor as to the above warnings, conditions and their ramifications.

_____	_____	_____
Parent / Guardian's Printed Name	Parent / Guardian's Signature	Date