

**Liability Waiver Acknowledgement**

I, We, the parent(s) or guardian(s) of the above-named child(ren) hereby give my/our approval to participate in any and all league activities related to the St. James / Seton Athletic Association. We assume all risks and hazards incidental to such participation, including transportation to and from the activities. I/We hereby waive, release, absolve, indemnify and agree not to hold the St. James / Seton Athletic Association, St. James / Seton School and/or its affiliated organizations, sponsors, participants and persons for any claim arising out of an injury/accident to my/our child(ren), whether a result of negligence or from any other cause. I/We further acknowledge the St. James / Seton Athletic Association, St. James / Seton School and/or its affiliated organizations do not provide medical insurance.

**Print Name of Participant** \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_

**Print Name of Parent/Guardian** \_\_\_\_\_