



**Team:**  
**Captain:**  
**Location:**  
**Day:**  
**Captain's Phone #:**

**WAIVER AND RELEASE OF LIABILITY**

**This form must be signed by all players before they can participate.**

As a condition to playing and/or participating in the sports programming provided by the Buffalo Volleyball, LLC, I do hereby agree to the following:

- 1) I acknowledge and agree that prior to my participation in the Buffalo Volleyball, LLC programming I know and understand the scope, nature and extent of the risks involved and inherent in playing and the types of related activities associated therewith. I acknowledge and fully understand that all activities provided by Buffalo Volleyball, LLC involve a significant risk of injury, some of which may be severe and which may result from my own actions, the actions of others, or the condition of the location where upon the activities take place. I also acknowledge that there may be other unknown or reasonably unforeseen risks at this time.
- 2) I expressly and voluntarily assume all risk of personal injury or damage to or loss of my property while participating in activities provided by or managed by Buffalo Volleyball, LLC, including the acts of any other party. I accept personal responsibility for the same.
- 3) I agree to abide by all rules and regulations set forth by Buffalo Volleyball, LLC at all times.
- 4) I hereby release, indemnify and hold harmless Buffalo Volleyball, LLC, its owners, operators, employee, agents, and the city and/or agency that Buffalo Volleyball, LLC has a permit with for field usage from any and all liabilities, actions, causes of action, rights, claims, demands, damages, costs, loss of earnings or earning capacity, expenses, and compensation, on account of or in any way arising out of, any and all injuries, damages or losses, whether known or unknown, foreseen or unforeseen, which are sustained from participation in activities provided by or managed by Buffalo Volleyball, LLC.
- 5) I further represent that I have the legal capacity to enter into this Agreement and that I have no physical infirmity or chronic injury or ailment of any nature that would hinder my ability to participate in activities provided by or managed by Buffalo Volleyball, LLC.
- 6) I am 18 years of age or older, and this Waiver is being signed by my self
- 7) By signing below I have read this Agreement and understand that its terms and conditions reaffirm my voluntary assumption of the risk of injury or my participation in activities provided by or managed by the Buffalo Volleyball, LLC.

	<b>Name (Print)</b>	<b>Signature</b>
<b>Captain</b>		
<b>2</b>		
<b>3</b>		
<b>4</b>		
<b>5</b>		
<b>6</b>		
<b>7</b>		
<b>8</b>		
<i>There is a \$25.00 insurance fee for every player on the roster over the 8 provided above.</i>		
<b>9</b>		
<b>10</b>		