



# Freedom Cowboys Athletics

## LIABILITY WAIVER

This **Liability Waiver Form** must be completed, and signed by the parent or guardian for each student athlete (the phrase, “student athlete” is inclusive of all participants of any event including, but not limited to, football players, managers, mascots and cheerleaders as well as any volunteers, coaches or support staff) before participation in any Freedom Cowboys Athletics practice, game, activity, contest or event, including travel (herein referred to as “Sponsored Activity”). The original must be on file with the Athletic Director.

### PARENT / GUARDIAN RELEASE

FOR AND IN CONSIDERATION OF the mutual promises, covenants, conditions, representations, and warranties contained herein, and for other good and valuable consideration, the receipt and legal sufficiency of which are hereby acknowledged, it is agreed as follows:

The undersigned hereby releases and forever discharges Freedom Cowboys, and its successors, along with all of its agents, volunteers, directors, officers, assigns, and attorneys, from any and all claims, demands, actions, causes of action or suits arising out of any injury, known or unknown, which result from, has resulted from or may in the future result from any Sponsored Activity.

The undersigned hereby assumes all risk of injury, to person or property, associated with any Sponsored Activity and fully indemnifies and holds harmless all Freedom entities, and future entities, along with its agents, volunteers, directors, officers, assigns, and attorneys from and against any and all liability, loss, cost, damage, and expense, including attorney’s fees, which Freedom Cowboys or its agents, employees, directors, officers, assigns, and attorneys may incur as a result of any Sponsored Activity.

*This liability waiver / release applies to the following student athlete:*

**STUDENT’S NAME:** \_\_\_\_\_  
First Middle Last

**HOME ADDRESS:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Street City State Zip

*Currently enrolled in:*

**SCHOOL NAME:** \_\_\_\_\_

**SCHOOL ADDRESS:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Street City State Zip

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Parent / Guardian’s Signature Parent / Guardian’s Printed Name

**(A copy of this form must be given to the Athletic Director)**

**Freedom Cowboys 256-656-4796**