



2021 WLL SNACK BAR JR WORKER WAIVER



(1) Type or write-in all requested information

(2) Send **completed** form to: snackbar@woodcreeklittleleague.com

LAST NAME: _____

FIRST NAME: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN EMAIL: _____

PARENT/GUARDIAN PHONE: _____

*It is important that the e-mail and Phone Number listed are the BEST way for you to be reached by Woodcreek Little League during the baseball season. If you list your parents' e-mail or phone, make sure that they are aware you will be receiving messages and calls.

PARENT/GUARDIAN - PLEASE READ CAREFULLY AND INITIAL:

* As Parent/Guardian of the above-named child, I consent for my child to participate in the WLL Snack Bar Jr Worker program for the current season and I agree to assume all risks and hazards associated with my child's working in the Snack Bar.

INITIAL: _____

* Knowing fully that working in the snack bar could result in serious injury to my child, regardless of the use of protective equipment, I unconditionally agree to release, indemnify, save, absolve and hold harmless WLL and all of its elected and appointed officials, officers, directors, managers, coaches, sponsors, supervisors, organizers, supporters, participants, persons transporting my child to and from activities, and District and National Little League Headquarters, from and against any and all claims arising out of any injury to my child arising from accident, negligence, or any other cause, except to the extent and in the maximum amount covered by Little League accident or liability insurance.

INITIAL: _____

* I agree to comply completely with the WLL standards as set forth by the league president and/or Snack Bar Coordinator and the City of Roseville Parks & Recreation posted facility regulations. (WLL Rules of Conduct available upon request)

INITIAL: _____

* I agree to my child's temperature being taken once they arrive at the Snack Bar to work their shift. I understand that this information will be logged and used for contact tracing and to notify others of a possible exposure to Covid-19.

INITIAL: _____

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19: The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. Woodcreek Little League ("the League") has put in place preventative measures to reduce the spread of COVID-19; however, the League cannot guarantee that you or your child(ren) will not become infected with COVID-

19. Further, participating in the League could increase your risk and your child(ren)'s risk of contracting COVID-19.

By acknowledging this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by participating in the League and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 while participating in the League may result from the actions, omissions, or negligence of myself and others, including, but not limited to, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s participation in the League. On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the League, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the League, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any League activity. I acknowledge that I have read/received a copy of the protocols, noted on the WLL website, put into place by the County and League and agree to strictly comply with them at all times. I understand that any failure to comply will result in a loss of ability to participate in the League.

INITIAL: _____

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PARENT / GUARDIAN SIGNATURE _____ DATE _____

PRINTED NAME _____ RELATIONSHIP _____

PROSPECTIVE JR WORKER SIGNATURE _____

DATE _____