

RELEASE AND WAIVER OF LIABILITY
(the "Release")

READ THIS DOCUMENT THOROUGHLY BEFORE YOU SIGN.

Please E-Mail or Hand In This Document To Jasneet Lakhyan on or before
June 14th, 2025

**Tournament Location: Forest Lawn Athletic Park, 4808
14th Street Southeast**

To be held on June 14th and 15th 2025

In consideration of my (my child's) participation in the Diversity Cup 2025 Soccer Tournament (the "**Event**"), I agree and acknowledge that:

1. I (my child) will abide by the rules and regulations imposed on participants in the Event.
2. I acknowledge that there are risks and hazards inherent in the Event (including personal injury or property loss) to which I am willing to expose myself (my child).
3. I freely and voluntarily acknowledge and assume any and all risks and hazards inherent in the Event (including personal injury or property loss), and accordingly, my (my child's) participation in the Event is **entirely at my own risk**.
4. I waive any claim I may have against the City of Calgary, the Chief of Police of the Calgary Police Service, the Calgary Police Service, or the Calgary Police Youth Foundation, and any of their contractors, agents, officers, directors, employees, members, sponsors, or volunteers (collectively referred to as the "**Organizers**"), including but not limited to any claims arising from the negligence or fault of the Organizers and any claims for personal injury or property loss arising from my (my child's) participation in the Event.
5. I will indemnify and save harmless the Organizers for any claim arising out of my or my child's participation in the Event and for any costs incurred by the Organizers should a suit be launched on my or my child's behalf.
6. The Organisers may secure such medical advice and services as in its sole discretion may deem necessary for my (my child's) health and safety and I shall be financially responsible for such advice and services
7. I have CAREFULLY READ this Release and fully understand it and am freely signing it.

Dated at Calgary, Alberta this _____ day of _____ (month) _____ (year).

Name of Participant (Please Print)

Name of Participant's Parent or Guardian
if Participant is under 18 years

Address

Phone Number

Email

Signature of Participant (or Participant's
Parent or Guardian if Participant is under 18
years)

Witness Signature