SkillsUSA Ohio
Waiver, Release, Indemnification of All Claims & Covenant Not to Sue Form
Minor Participant

NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. Read this document carefully and in its entirety. By signing this agreement, you give up your right to bring a court action to recover compensation or obtain any other remedy for any personal injury or property damage however caused arising out of your participation in SkillsUSA Ohio Programs, now or at any time in the future.

Acknowledgement of Risk

I, in my legal capacity as the parent/guardian of the minor named below, do hereby acknowledge and agree that participation in SkillsUSA Ohio programs/activities comes with inherent risks. I have full knowledge and understanding of the inherent risks associated with program participation, including but in no way limited to: (1) slips, trips, and falls, (2) competition injuries, (3) athletic injuries, and (4) illness, including exposure to and infection with viruses or bacteria. I further acknowledge that the preceding list is not inclusive of all possible risks associated with participation in the SkillsUSA Ohio program and that said list in no way limits the operation of this Agreement.

Coronavirus/COVID-19 Warning and Disclaimer

Coronavirus, COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing as a means to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, permanent disability, and death. Participating in SkillsUSA Ohio programs or accessing SkillsUSA Ohio contracted facilities could increase the risk of contracting COVID-19. SkillsUSA Ohio in no way warrants that COVID-19 infection will not occur through participation in SkillsUSA Ohio program or accessing SkillsUSA Ohio contracted event spaces.

Waiver, Release, Indemnification & Covenant Not to Sue

In consideration of_______________________________’s participation in SkillsUSA Ohio program and attendance at the events, including rental facilities, and off-site contest locations, I, __________________________, the parent/guardian of the minor named above, agree to release and on behalf of myself and the minor named above, my heirs, representatives, executors, administrators, and assign, HEREBY DO RELEASE SkillsUSA Ohio, its officers, directors, employees, volunteers, agents, representatives and insurers (“Releasees”) from any causes of action, claims, or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which I, the named minor, my heirs, representatives, executors, administrators, and assigns may have, now or in the future, against SkillsUSA Ohio on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to the participation in SkillsUSA Ohio programs whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of the Releasees.

________________
Initial
In consideration of named minor’s participation in SkillsUSA Ohio, I, the undersigned parent/guardian of the named minor, agree to INDEMNIFY AND HOLD HARMLESS Releasees from any and all causes of action, claims, demands, losses, or costs of any nature whatsoever arising out of or in any way related to the named minor’s SkillsUSA Ohio’s program participation.

I hereby certify on behalf of myself and the named minor that I have full knowledge of the nature and extent of the risks inherent to the SkillsUSA Ohio program participation and that I, on behalf of myself and the named minor, am voluntarily assuming said risks. I understand that I and the named minor will be solely responsible for any loss or damage, including personal injury, property damage, or death, the named minor sustains while participating in SkillsUSA Ohio programs and that by signing this agreement I, on behalf of myself and the named minor, HEREBY RELEASE Releasees from all liability for such loss, damage, or death. I further certify that the named minor is in good health and has no conditions or impairments, which would preclude his/her safe participation in the SkillsUSA Ohio program.

I further certify that my date of birth is ________________________ (MM/DD/YYYY), that my present age is __________, and that I am therefore of lawful age (18 years or older) and otherwise legally competent to sign this agreement, and that I have legal capacity to act as the parent/guardian of the named minor. I further understand that the terms of this agreement are legally binding and certify that I am signing this agreement, after having carefully read it, of my own free will.

________________________________________________
Participant’s Name (Print Clearly)

____________________________________________
Date

________________________________________________
Parent/Guardian Signature

________________________________________
Parent/Guardian Name (Print Clearly)