

Cleveland Muny Football League



COVID 19 ACKOWLEDGEMENT AND WAIVER OF LIABLITY PLAYER/PARENT

I, as parent/guardian of	and personally, acknowledge that
COVID-19 is a disease spread and transmitte	ed from person to person. I understand that such disease may
be spread without the knowledge of	(organization). I
understand that	(organization) will follow state and federal (CDC)
guidelines for sports leagues, contests, and events but such efforts may not prevent the potential spread of	
COVID-19. Recognizing the possibility of s	pread of COVID-19, I understand and accept the risks
associated with COVID-19 to my child and r	ny own person as part of my bringing my child to
(organization).	
I, as parent/guardian of	,and personally, hereby
waive, release, discharge and/or otherwise in	demnify the
(organization), its employees, coaches, staff and other members against any claims by or on behalf of my	
minor child or myself for any spread or care needed due to any COVID-19 infections arising from my	
child's participation with the	(organization).
	Signed:
	Parent's Name Printed:
	Signed:
	Parent's Name Printed:
	Parent(s) of
	Date: