SOUTHEAST SUPER REGIONAL WAIVER FORM

Tendaji Inc, LLC Release and Waiver of Liability

P**LEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS.**

This Release and Waiver of Liability (the "Release") is executed in favor of Tendaji, Inc., Next Level SC travel team, the City of Rock Hill SC, York County SC, their directors, officers, employees, volunteers, owners, and agents.

I, (Participant/Spectator) desire to participate in or observe sporting activities at The Rock Hill Sports and Events Center and engage in the activities related to playing or observing sports (the "Activities"). I hereby freely, voluntarily, and without duress execute this Release under the following terms:

**Release and Waiver.** I hereby release and forever discharge and hold harmless Tendaji Inc, Next Level SC, the City of Rock Hill, York county and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature either in law or in equity, which arise or may hereafter arise from any activities in which I engage with at The Rock Hill Sports and events center.

I understand that this Release discharges all listed parties from any liability or claim that I may have against The Rock Hill Sports and Events center during this event with respect to any bodily injury, personal injury, illness (including but not limited to COVID-19), death or property damage that may result from my Activities during the SouthEast Super Regional, whether caused by the negligence of Tendaji Inc, Next Level SC, the City of Rock Hill, York county or its officers, directors, employees, volunteers ore agents or otherwise. I also understand that these parties do not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

**Medical Treatment**. I hereby release and forever discharge Tendaji Inc, Next Level SC, the City of Rock Hill, York county from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with my Activities at the Rock Hill Sports and Events Center.

**Assumption of the Risk.** I understand that the Activities may be hazardous to me. I hereby expressly and specifically assume the risk of injury or harm in the Activities and hereby release Tendaji Inc, Next Level SC, the City of Rock Hill, & York county from all liability for injury, illness (including but not limited to COVID-19), death or property damage resulting from the

**Photographic Release.** I hereby grant and convey that Tendaji Inc & Next Level SC all right, title, and interest in any and all photographic images and video or audio recordings made during my Activities with Southeast Super Regional, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

**Other.** I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of South Carolina, and that this Release shall be governed by and interpreted in accordance with the laws of the State of South Carolina. I agree that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforce

**Players/Coaches**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please have signature of parent/legal guardian if Player is under 18

Signature of Parent/Legal Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Spectators**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_