**Agreement, Release and Waiver of Liability** CENTRAL FLORIDA GLIDERS TRACK CLUB   
  
In consideration of being permitted to practice with the Central Florida Gliders Track Club practice and compete in related events and/or activities:

(1)I ACKNOWLEDGE, UNDERSTAND, DECLARE AND AGREE THAT:   
(a) To the best of my knowledge, I am in Good Physical Condition and have no disease or injury that would be aggravated by participating in training activities related;   
  
(b) Participating or assisting others in participating in the League may involve the contact with individuals, who have been exposed to and/or have been diagnosed with one or more communicable diseases, including but not limited to COVID-19 or other medical conditions or diseases.  
  
(2) I ASSUME ALL OF THE ABOVE RISKS AND RELEASE, WAIVE, DISCHARGE, HOLD HARMLESS, INDEMNIFY AND COVENANT NOT TO SUE:   
The Central Florida Gliders Track Club, its employees or volunteers, coaches, trainers, affiliated with the organizations, its sponsors, respective administrators, officers, directors or agents, Seminole County or the City of Altamonte Springs.  
(3) I FURTHER AGREE THAT:   
 I CONSENT TO ALL EMERGENCY MEDICAL TREATMENT as may be deemed appropriate under existing circumstances by medical personnel or personnel associated with the Gliders.

(4) I HAVE READ THIS FORM IN ITS ENTIRETY and have provided the truthful signature of the athlete or Parent/Guardian if the participant is under 18 years of age. All participants must complete the Agreement, Release and Waiver of Liability in order to practice and compete with the Central Florida Gliders running organization.

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Signature of Athlete or Legal Guardian Date