WASATCH
SPORTS ACADEMY

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Participation Agreement and Release of Liability

Assumption of risk · release · indemnity · program terms. Complete one for each athlete, each season.

Athlete and parent / guardian

Athlete's full legal name | Preferred name | Date of birth

Parent / guardian name | Phone | Email

Home address (street, city, ZIP)

This Participation Agreement ("Agreement") is between Wasatch Sports Academy, LLC, a Utah limited liability company ("WSA") and the parent(s) or legal guardian(s) signing below ("Parent," "I"), for the athlete named above ("Athlete").

1. The program

WSA is a youth multi-sport program. Soccer starts in March 2027 and basketball is planned for winter 2027–28; other sports may be added. Activities include practices, games, scrimmages, tryouts, camps, clinics, team events, and related travel to and from WSA activities ("Activities"). Program ages: elementary through middle school. Locations: to be announced before each season.

2. Requirements to participate

- A completed Family Application, Medical Treatment Consent and Emergency Information form, Concussion Acknowledgment (required by Utah Code § 26B-4-403 before play), and Photo/Media Consent for the Athlete.
- A School Good-Standing Letter from a teacher or principal for every enrolling child (a behavior check, not a grade review, and not tied to any discount).
- Payment of fees according to the fee schedule in effect at registration (posted at www.wsautah.com/fees), and agreement to the WSA Refund Policy.
- Following the WSA Child Safety Program, codes of conduct, and coach and staff instructions. The WSA motto is Discipline: respect for teammates, coaches, officials, and opponents is expected.

3. Inherent risks and assumption of risk

I understand that sports have inherent risks that cannot be removed without changing the nature of the sport. These include, for example:

- running, jumping, cutting, falling, and collisions with other players, goalposts, walls, the ball, or the ground;
- kicks, elbows, and contact during play; in soccer, heading the ball (WSA follows U.S. Soccer heading guidelines as applied by the state association); in basketball, hard court surfaces and contact near the basket;
- sprains, strains, fractures, dislocations, dental and eye injuries, cuts, concussion and other head injuries, and, rarely, catastrophic injury, paralysis, or death;

- heat illness, dehydration, cold, sun exposure, lightning, wind, poor air quality, and uneven or wet fields;
- allergic reactions, asthma, and pre-existing medical conditions;
- travel to and from Activities, and the actions of other participants, spectators, and the public.

Knowing these risks, I agree to let the Athlete participate, and I voluntarily assume these risks on my own behalf and, to the extent permitted by law, on behalf of the Athlete. I confirm the Athlete is physically able to participate and I will tell WSA in writing about any change in the Athlete's health.

I have read and understand Sections 1–3.	Initials

4. Release of liability

To the fullest extent permitted by Utah law, I, for myself and for my heirs and assigns, release and agree not to sue WSA, its owners, officers, employees, coaches, volunteers, and agents, and the owners of fields and facilities WSA uses (the "Released Parties") for any claim, injury, illness, loss, or damage arising from the Athlete's participation in Activities, including claims based on the ordinary negligence of the Released Parties. To the extent the law allows, I also give this release on behalf of the Athlete. This release does not apply to gross negligence, recklessness, or intentional misconduct, or to any claim that cannot be released under Utah law.

I have read and understand Section 4 (Release).	Initials

5. Indemnity

To the fullest extent permitted by law, I agree to defend, indemnify, and hold harmless the Released Parties from claims, costs, and reasonable attorney fees that arise from (a) my own acts or omissions, (b) my breach of this Agreement, or (c) false or incomplete medical or other information that I provide.

I have read and understand Section 5 (Indemnity).	Initials

6. Medical care and concussion

Emergency and medical care are covered by the Medical Treatment Consent and Emergency Information form. Any athlete suspected of a concussion or traumatic head injury is removed from play immediately and may not return until WSA receives the written clearance required by Utah Code § 26B-4-404 (see the Concussion Acknowledgment). I am responsible for medical costs. WSA carries business insurance through Hiscox. WSA does not provide health insurance for athletes.

7. Fees, refunds, and discounts

- Fees and payment terms are in the fee schedule in effect at registration (posted at www.wsautah.com/fees).

- Refunds follow the WSA Refund Policy, which is part of this Agreement: no refund when a parent withdraws the Athlete early; if WSA cancels a season or session block, a full refund of what was paid for it; if WSA cancels an entire season, the registration fee is refunded too.
- Sibling discount: the second (and later) child to register in the same household (same parent or guardian and same address; the address controls) receives the sibling discount in the current fee schedule. Other discounts and scholarships follow the fee schedule.

8. Conduct, supervision, and pickup

I agree that the Athlete will follow team rules and the WSA Child Safety Program. WSA may suspend or dismiss an athlete or family for unsafe or abusive conduct (refund treatment is set in the Refund Policy). I am responsible for transportation and for on-time drop-off and pickup; WSA releases athletes only to me or an adult on my authorized pickup list.

9. Photos and media

Use of the Athlete's image is governed only by my choices on the Photo/Media Consent and the Media Release Form, and by the WSA Media Policy. Signing this Agreement does not by itself give media consent.

10. Weather and cancellations

WSA may cancel or move Activities for weather, lightning, air quality, field closures, or safety. Makeup sessions and refund effects are handled under the Refund Policy.

11. Severability and general terms

Severability. This Agreement is intended to be as broad as Utah law allows. If any part of it (including any part of Sections 4 or 5, or its application to the Athlete) is found invalid or unenforceable, that part will be enforced to the extent permitted or removed, and the rest of this Agreement will remain in full force and effect. This Agreement is governed by Utah law, with venue in Salt Lake County, Utah. It, together with the documents it references (Refund Policy, Medical Treatment Consent, Concussion Acknowledgment, Photo/Media Consent, Media Release Form, and Child Safety Program), is the entire agreement about the Athlete's participation. I may sign electronically. I have had the opportunity to ask questions and to consult a lawyer. Before you sign I have read this entire Agreement. I understand that I am giving up certain legal rights, including the right to sue for ordinary negligence, to the extent Utah law allows. I sign voluntarily.

Parent / guardian signature	Printed name	Date
Second parent / guardian (optional) signature	Printed name	Date

Athlete acknowledgment (recommended for athletes age 13 and older): I understand the risks of my sport and I agree to follow the rules and my coaches' instructions, and to tell a coach and my parent if I am hurt or feel any concussion symptoms.

Athlete signature	Athlete printed name	Date

Office use: Received _____ Entered in Portal ☐ Staff initials _____ Form version: v1 · Effective October 6, 2026