**Octane Waiver Agreement**

1. I hereby authorize the director or any member(s) of the league staff to act for me according to their best judgement in an emergency requiring medical attention. I hereby waive and release Octane Football, and all members of the league staff from all claims due to injuries that may be sustained by my child while attending this league. I agree to indemnify Octane Football and all members of the league for any claim that may hereafter be presented by my child as a result of such injury.
2. Use of Likeness. I understand while participating in the Activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by Octane Football SMG and its assigns.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_