

## Waiver of Liability and Release Form

This form must be completed for each soccer participant and, if the player is under 18 years old, must be signed by the participant's parent or legal guardian. No player will be allowed to participate in Performance Soccer Training, LLC's ("PST") programs and activities without this form, properly executed, and on file.

PARTICIPANT'S NAME (*print*): \_\_\_\_\_

PARTICIPANT'S DATE OF BIRTH (*mm/dd/yyyy*): \_\_\_\_\_

I, the undersigned, in consideration for my child's participation in organized soccer, do hereby willfully acknowledge that my signature below attests to my understanding and agreement that:

Soccer is a physical, contact sport that involves the risk of injury. I assume all risks and hazards associated with my child's participation in the sport. My child is in proper physical condition to participate in soccer activities, practices and games and has no illness, disease or existing injury or physical defect that would be aggravated by his/her participation. I will inform PST in writing if this status changes. I further acknowledge that this risk may involve loss or injury to my child or his/her property, including the risk of death, or other unforeseen consequences, including those which may be due to the unavailability of immediate emergency medical care. My child will wear shin guards, properly fitted and appropriate shoes, and other protective equipment (e.g., mouth-pieces), as provided by soccer rules, to all events.

I have a current, active, personal injury insurance policy in force, which covers my child's participation. Under any condition, I am responsible for any and all medical expenses arising from my child's participation in soccer activities, practices and games, and while travelling to and from these events. I have the right and responsibility to inspect the equipment and facilities prior to events and, if I believe that anything may be unsafe, I will advise PST's trainer or supervisor of the condition and may refuse to allow my child to participate. Participation assumes consent.

I hereby release, waive liability, discharge, hold harmless, indemnify, and covenant not to sue, PST, its members, owners, associated directors, administrators, officers, managers, employees, contractors, coaches, trainers, volunteers, sponsors and advertisers, and all other agents (including without limitation, owners, lessors, and lessees of premises, municipalities, government agencies) and all of the foregoing's successors, heirs, and assigns, from any and all liability incurred in the conduct of, and my child's participation in, PST's soccer programs.

I have completely read this document and fully understand its contents. I acknowledge that I have given up substantial rights by accepting the terms of this document and that I do so voluntarily. My signature attests to this on behalf of myself and my executors, personal representatives, administrators, heirs, next-of-kin, successors, and assigns.

As the parent and natural guardian or legal guardian of the participant, who is under the age of eighteen (18), I hereby agree to the foregoing Waiver of Liability and Release for, and on behalf of, the participant named above. I hereby bind myself, the minor, and all heirs and assigns to the terms of this Waiver of Liability and Release. I represent and certify that I have the legal capacity and the authority to act for, and on behalf of, the minor in the execution of this Waiver of Liability and Release.

\_\_\_\_\_  
Parent or Guardian Name (*print*)

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date Signed (*mm/dd/yy*)