TEAM NAME	Age	Bracket	M	F
RELEASE AND WAIVE	R OF LIABILITY, A			O INDEMNITY
IN CONSIDERATION of being Soccer Center. I, for myself				
such Activity. I further a	and represent that I unders d(s) are qualified, in good gree and warrant that if at further participation in the	health, and in prop any time I believe of	er physical condition	
("RISKS"); (b) these Risinaction's of others partined in the second of t	ks and dangers may be caucipating in the Activity, the ELEASEES" NAMED BELOW er not known to me or not its AND ALL RESPONSIBILITATE of the minor in the Activity respective areas, other participants, pare on which the Activity takes AIMS, DEMANDS, LOSSES, OR IN PART BY THE NEGLIGERATIONS AND I FURTHER OF RISK, AND INDEMNITY sees, I WILL INDEMNITY, Sees, I WILL INDEMNITY, Sees, I WILL INDEMNITY, Sees, I WILL INDEMNITY is attorney fees, loss, liability of IT AND HAVE SIGNED IN BE A COMPLETE AND UNCOLUMN AND AGREE THAT IF THSTANDING, SHALL CONTINUED.	S PERMANENT DISAL ISED BY MY OR THEIR CONDITIONAL RELEASE TO A CONDITIONAL RELEASE TO A CONDITIONAL RELEASE TO A CONDITIONAL RELEASE ANY PORTION OF THE TABLE ANY PORTION OF THE A CONDITIONAL RELEASE ANY PORTIONAL RELEASE ANY	own actions or inacthe Activity takes placed at this time; and I I STS, AND DAMAGES BE, DISCHARGE, AND CONTROL OF THE ACCOUNT CAUSE EASEES" OR OTHER WITH ACCOUNT CAUSE EASEES OR OTHER WITH ACCOUNT CAUSE EASE OF ALL LIABILITY ACCOUNT CAUSE EASE OF ALL LIABILITY ASE OF ALL LIABILITY	AND DEATH tion's, the actions or ace, or THE SOCIAL AND FULLY ACCEPT AND S I incur as a result D COVENANT NOT s, members, applicable, owner ELEASEES" herein) ED OR ALLEGED TO WISE, INCLUDING ND WAIVER OF lif, makes a claim THE RELEASEES from the result of such ZEN UP TO R ASSURANCE OF TY TO THE
Date of Birth	Address:		(Stree	et)(City)(State)(Zip)
Phone: Participant's Signature (only	if age 18 or over):			_/ /
· an are parties or grant and (or my	ago 20 o. o.o.,.			
	MINOR	Date _ RELEASE		
MINOR TO BE QUALIFIED, IN GO ACTIVITY. I HEREBY RELEASE, D HOLD HARMLESS EACH OF THE MINOR'S ACCOUNT CAUSED OR "RELEASEES" OR OTHERWISE, I THIS RELEASE, I, THE MINOR, O RELEASEES NAMED ABOVE, I W LITIGATION EXPENSES, ATTORN ANY SUCH CLAIM, AND AGREE I	R LEGAL GUARDIAN, UNDER ACTIVITIES AND THE MINO DOD HEALTH, AND IN PROPOSE THE ACTIVITIES AND THE MINO RELEASEE'S FROM ALL LIA ALLEGED TO BE CAUSED INCLUDING NEGLIGENT RESON ANYONE ON THE MINOR ILL INDEMNIFY, SAVE, AND REY FEES, LOSS LIABILITY, TO THE ABOVE STATED TER	RSTAND THE NATURAL CONFINE SEXPERIENCE AND EXPERIENCE AND AGE OF THE SEX OF T	ND CAPABILITIES AND CAPABILITIES AND TO PARTICIP REE TO INDEMNIFY MANDS, LOSSES, ON THE RECLIGE NO FURTHER AGREDA CLAIM AGAINST A EACH OF THE RELEATION AS ANY MAY INCUR AS	ATE IN SUCH AND SAVE AND R DAMAGES ON THE ENCE OF THE E THAT IF, DESPITE NY OF THE ASEES FROM ANY
Printed Name of Parent/Guardian: (Street) (City) (State) (Zip)				
Phone:		reer) (City) (State)	( <b>∠</b> IÞ)	
PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18): Date				