

## WINTER FUTSAL PARTICIPANT WAIVER

Recognizing the possibility of injury or illness, and in consideration for Sporting Columbia SC and members of Sporting Columbia SC accepting my son/daughter as a player in the soccer programs and activities of Sporting Columbia SC and its members (the "Programs"), I/We consent to my son/daughter participating in the Programs. Further, I/We hereby release, discharge, and otherwise indemnify Sporting Columbia SC, its member organizations and sponsors, their employees, associated personnel, and volunteers, including the owner of fields and facilities utilized for the Programs, against any claim by or on behalf of my player son/daughter as a result of my son's/daughter's participation in the Programs and/or being transported to or from the Programs.

My player son/daughter has received a physical examination by a licensed medical doctor and has been found physically capable of participating in the sport of soccer. I/We have provided written notice, which is submitted in conjunction with this release and attached hereto, setting forth any specific issue, condition, or ailment that my child has or that may impact my child's participation in the Programs. I/We give consent to have an athletic trainer and/or licensed medical doctor or dentist provide my son/daughter with medical assistance and/or treatment and agree to be financially responsible for the reasonable cost of any such assistance and/or treatment.

I/We hereby consent to any and all uses and displays by the releasees of the participant's name, voice, likeness, image, appearance and biographical information in, on or in connection with any pictures, photographs, audio and video recordings, digital images, all of which are hereinafter referred to as depictions, that are shown on websites, in television programs and advertising, sales and marketing brochures, books, magazines, all other printed and electronic forms and media including without limitation for the purpose of promoting Sporting Columbia SC and/or its initiatives and the sport of soccer and for promotional, commercial other purposes as determined by Sporting Columbia SC anywhere in the world in its sole discretion. On behalf of the participant, I/We understand that all depictions shall be the sole property of Sporting Columbia SC and neither I/We nor the participant shall receive any compensation in connection with their use. Further I/We hereby release, waive and discharge any claims of any kind or nature arising out of or relating to the use of the depictions against Sporting Columbia SC and its releasees.

On behalf of the participant, I/We have read the above waiver/release and understand that I/We have given up substantial rights by signing this release and sign below voluntarily. I/We understand that this document may not be altered in any manner and that any alteration without the express written consent from Sporting Columbia SC will cause the participant to be removed from the Program.

Player Name:		
Parent/Guardian Name:		
Parent/Guardian Signature:	Date:	