



AFFILIATED TO FONTANA SOCCER ASSOCIATION CORPORATE

**OFFICE USE ONLY** Player ID #

DATE/TEAM/REEMPLACE/TRANSFER	DATE/TEAM/REEMPLACE/TRANSFER
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TEAM NAME	RANGE
	COMPETITIVE / RECREATIONAL

**PLAYER INFORMATION**

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FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_ LAST NAME \_\_\_\_\_

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STREET ADDRESSES \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

B= BOY  
 G= GIRL

DATE OF BIRTH \_\_\_\_\_

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EMERGENCY CONTACT #1 / NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

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EMERGENCY CONTACT # 2 / NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

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FATHER NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

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MOTHER NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

**RELEASE OF LIABILITY & ASSUMPTION OF RISK INCLUDED COVID-19 DISEASE**

I \_\_\_\_\_ on behalf of myself: or on behalf of my minor \_\_\_\_\_, hereby waive in advance any and all actions or causes of action and claims for injury property damage which I may have, or which may hereafter accrue to the participant, his/her heirs or other successors as result of my participation in any activity, or activities incidental thereto, (hereinafter referred to as the "activity" sponsored by Fontana Soccer Association; Fontana Premier Soccer League; Steelers Futbol Club; Coach Alfonso Cano; Coach Iseah Gonzalez; .This is intended to release and hold harmless the Fontana Soccer Association; Fontana Premier Soccer League; Steelers Futbol Club; Coach Alfonso Cano; Coach Iseah Gonzalez: and its elected officials, officers, employees, contractors, agents and facilities owners.

I understand that the participant must be in good health prior to participating in the activity . I understand that serious accidents occasionally occur participants during such an activity, and during activities incidental to such an activity. Knowing these risks, I expressly assume those risks and agree that under no circumstances will I, or any of the participants heirs or successors present any claim or action against the Fontana Soccer Association, Fontana Premier Soccer League, Steelers Futbol Club, Coach Alfonso Cano; Coach Iseah Gonzalez: and Facilities owners.

I also agree that the participant may be photographed and /or filmed, and or agree to have the participant photographed and or filmed, and release the use of the photographs and or footage for publicity in FONSA;FPSL; STEELERS CLUB; publications and other public information materials.

I hereby represent that I understand an am familiar with the nature of the activities in which I ( or my minor ) will participate in this activities.. I personally read and understand this release; also I agree that registration fee its at **non refundable basis** three days after date signed; (on some cases refundable request will be at dated and write manner )

I do hereby give permission for any emergency professional or health care professional to administer any type of medical treatment he/she deems necessary to above minor in case of an emergency and in the event that I cannot be contacted.

In consideration of being allowed to participate in athletic programming, and sanctified activities and events ( collectively " Sanctified Activities " ) related to Fontana Soccer Association and those affiliated, Fontana Premier Soccer League, Fontana Steelers Club, Coach Alfonso Cano; Coach Iseah Gonzalez; and its elected officials, officers, employees, contractors and agents, the undersigned acknowledges, appreciates, and agrees to all language on such Organizations and officials Waiver/Release for Communicable Diseases including COVID-19, Assumption of Risk/Waiver of Liability/ Indemnification Agreement, Return to play phases and Responsibilities information and Protocol and Prevention Guidelines.

Signature of Participant. Parent or Guardian:

Date