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# Waiver of Liability and Release Form

This form must be completed for each soccer player (participant) and, if the player is under 18-years old, must be signed by the player's parent or legal guardian. No player will be allowed to participate in Salem NH Soccer league or any tournament games without this form, properly executed, and on file.

PARTICIPANT'S NAME: \_\_\_\_\_ DOB (mm/dd/yyyy): \_\_\_\_\_

## Participant Agreement

I, the parent/guardian of the registrant, in consideration for my voluntary participation in organized soccer, do hereby willfully acknowledge that my signature below attests to my understanding and agreement that:

- My/registrant player status will be kept in good standing. I will not compromise myself in such a way as to do harm to the league or tournament, knowing that players may be dismissed from participation, with possible loss of payment or dues, for violent conduct or unsportsmanlike behavior on or off the field of play. I agree to pay for any and all damages to any property or indemnities caused by me willfully, negligently, or otherwise.
- Soccer is a physical, contact, sport that involves the risk of injury. I assume all risks and hazards associated with my participation in the sport. I am in proper physical condition to participate in soccer practices and games and have no illness, disease or existing injury or physical defect that would be aggravated by my participation. I will inform my coach if this status changes. I further acknowledge that this risk may involve loss or damage to me or my property, including the risk of death, or other unforeseen consequences, including those which may be due to the unavailability of immediate emergency medical care. I have a current medical consent form in force. I will wear shinguards, properly-fitted and appropriate shoes, and other protective equipment (e.g., mouth-pieces), as provided by soccer rules, to all events.
- I, the parent/guardian of the registrant, authorize my photograph, picture or likeness, and voice to appear in any documentary, promotion (including advertising), television, video, or radio coverage of the league or tournament, without compensation.
- I, the parent/guardian of the registrant, authorize that an unaltered copy of this form may be generated and given to the officers or directors of other leagues or tournaments in order to allow my participation in their soccer programs, if the form is required and I have requested to participate.
- I, the parent/guardian of the registrant, hereby release, waive liability, discharge, hold harmless, indemnify, and covenant not to sue, the United States Soccer Federation, the State Association, Salem NH Soccer, the league and tournament, their associated directors, administrators, officers, managers, employees, coaches, trainers, volunteers, sponsors and advertisers, and other agents, estates or executors, from any and all liability incurred in the conduct of, and my participation in, their soccer programs. This includes owners, lessors, and lessees of premises, municipalities, government agencies, successors, heirs, and assigns.
- I, the parent/guardian of the registrant, have completely read this document and fully understand its contents. I acknowledge that I have given up substantial rights by accepting 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.
- I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the New Hampshire Soccer Association (NHSA), USYSA and its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration of NHSA and USYSA accepting the registrant for its soccer programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify the USYSA and its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

**Members shall encourage and demonstrate sportsmanship and treat all players, coaches, referees and spectators with respect. Should a parent/spectator or member not adhere to the above, suspension or expulsion from the Program could result.**

## Consent for Medical Treatment (minor)

As the Parent or Legal Guardian of the above-named registrant, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb, or well-being of my dependent.

\_\_\_\_\_  
 Parent/Guardian or 18+ participant (print)                      Parent/Guardian or 18+ participant signature                      DATE SIGNED

*For those individuals under the age of eighteen (18) years (minor): As the parent and natural guardian or legal guardian of the participant, I hereby agree to the foregoing Waiver of Liability and Release for, and on behalf of, the participant (player/minor) named above. I hereby bind myself, the minor, and all other assigns to the terms of the 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.*