

Wavier of Liability, Release of Liability, Assumption of Risk
Pateadores NM Acacdemy, Vela Soccer Academy and Elite Sports Academy
2020/21 Camps, Clinics and training sessions

Participant Name: _____ Age: _____

Assumption of Risk

Soccer is a physical activity that has certain inherent risks that could result in physical harm, including but not limited to: scrapes, bruises, joint sprain, muscle strain, concussion, heat related illness, and in extreme cases death. As well, in these unprecedented times, CoVid19 is in our community. Although statistics do show very low risk in children transmitting the virus in outdoor training environments, there is always the inherent risk associated with the virus. I recognize and fully understand and appreciate the risks inherent in participation, and I assume full responsibility for all injuries or illnesses that may occur to my child.

Wavier of Negligence

For myself, my spouse, heirs, administrators, and next of kin, hereby waive and release PATEADORES NM ACADEMY (PatsNM), VELA SOCCER ACADEMY (VSA), and ELITE SPORTS ACADEMY (ESA), director, coaches, instructors and the Elite Sports Academy from all liability for any injuries and/ or losses which may occur to the above named athlete/participant, while participating in the soccer camp, clinic or training sessions, even if arising from the negligence of Pateadores NM, Vela Soccer Academy or the ESA or others.

Health

I hereby certify that my child is fully capable of participating in the designated sport and that my child is healthy and has no physical or mental disabilities or infirmities that would not allow safe participation. I will follow CoVid19 Protocol prior to training and NOT send my child if he/she is not feeling well prior to a session. I authorize the camp director, coaches and trainers to act for me according to their best judgment in any emergency requiring medical attention, including but not limited to first aid, CPR, or AED. I also give permission for my child to have medical treatment at a local medical facility and I guarantee payment of all expenses incurred in such transportation and treatment.

Indemnification and Hold Harmless. I agree to indemnify, reimburse, and hold harmless the PATEADORES NM, VELA SOCCER ACADEMY and the Gaffney Household and its associated persons for any and all injury, disability, death and or loss or damages to person or property even if arising from negligence.

I understand that PATEADORES NM (PATS), VELA SOCCER ACADEMY (VSA) and ELITE SPORTS ACADEMY has no obligation to supervise my child(ren) at the close of camp/clinic/training each day and I release PATS, VSA and the Gaffney Household and its director, coaches and instructors from any liability resulting from the lack of supervision of my child(ren) after the close of program.

As the parent or legal guardian of the child named above, I hereby give my full consent and approval for my child to participate in soccer camp/clinic or training session. I have read the release, wavier of liability, and assumption of risk agreement, fully understand its terms and significance, understand I have given up substantial rights by signing it and sign it freely and voluntarily without any inducement.

Parent Signature: _____ Date: _____

Parent Name: _____ Cell#: _____

Email address: _____