

Wavier of Liability, Release of Liability, Assumption of Risk
Vela Soccer Academy Camps and Clinics

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. I recognize and fully understand and appreciate the risks inherent in participation, and I assume full responsibility for all injuries that may occur to my child.

Wavier of Negligence

For myself, my spouse, heirs, administrators, and next of kin, hereby waive and release VELA SOCCER ACADEMY director, coaches, and instructors from all liability for any injuries and/ or losses which may occur to the above named camper while participating in the soccer camp, even if arising from the negligence of Vela Soccer Academy 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 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 VELA SOCCER ACADEMY 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 VELA SOCCER ACADEMY (VSA) has no obligation to supervise my child(ren) at the close of camp each day and I release VSA 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. 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#: _____