

# ST. REBEKAH SOCCER

## Parental Consent and Accident Waiver and Release of Liability Form

For each player under the age of 18, a parent or legal guardian must read and sign this form before any authorized participation can take place (practices or games) in the Southern U.S. Coptic Soccer Competition.

I am aware that participation for me (or my son/daughter) in the following activities can be dangerous with risk of injury: 1. Practices in preparation for the Southern U.S. Coptic Soccer Competition on or outside of St. Rebekah Church property 2. The Southern U.S. Coptic Soccer Competition.

I understand that my (or my son's/daughter's) participation in the aforementioned activities could lead to injuries such as, but not limited to: sprains and strains of muscles and joints, serious neck and spinal injuries, injury or impairment to other aspects of my body, general health and well-being, and in severe cases, even death. Because of the potential dangers in participating, I recognize the importance of following instructions and adhering to all rules set forth by authorized personnel. Authorized personnel include but are not limited to all directors, officers, employees, volunteers, representatives, agents, and sponsors for both St. Rebekah Coptic Orthodox Church and Southern U.S. Coptic Soccer Competition.

I HEREBY ASSUME ALL OF THE RISKS OF MY (OR MY SON'S / DAUGHTER'S) PARTICIPATION IN THE ACTIVITIES MENTIONED ABOVE, including by way of example and not limitation, any risks that may arise from fault on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I (or my son/daughter) am physically fit, have sufficiently prepared or trained for participation in these activities, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my (or my son's/daughter's) participation in these activities.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by directors, officers, employees, volunteers, representatives, agents, and sponsors for both St. Rebekah Coptic Orthodox Church and Southern U.S. Coptic Soccer Competition and that it will govern my actions and responsibilities at the aforementioned activities.

In consideration of my (or my son's/daughter's) application and permitting me (or my son/daughter) to participate in these activities, I hereby take action for myself (or my son/daughter), my (my son's/daughter's) executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the fault of the entities or persons released, for my (or my son's/daughter's) death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from these activities, THE FOLLOWING ENTITIES OR PERSONS: St. Rebekah Coptic Orthodox Church and Southern U.S. Coptic Soccer Competition and/or their directors, officers, employees, volunteers, representatives, agents, sponsors.

(B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in the paragraph above from any and all liabilities or claims made as a result of participation in these activities, whether by fault of the released or otherwise.

I acknowledge that directors, officers, volunteers, representatives, and agents for both St. Rebekah Coptic Orthodox Church and Southern U.S. Coptic Soccer Competition are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I acknowledge that these activities may involve a test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, lack of hydration, and actions of other people including, but not limited to, participants, volunteers, monitors, and/or producers of the aforementioned activities. These risks are not only inherent to participants, but are also present for volunteers. I hereby consent that I (or my son/daughter) receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during these activities.

I understand while participating in these activities, I (or my son/daughter) may be photographed. I agree to allow my (or my son's/daughter's) photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns. The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

Additionally, I agree to take full responsibility and provide immediate compensation to St. Rebekah Coptic Orthodox Church or Southern U.S. Coptic Soccer Competition for any property damages on church property or outside of church property caused by my (or my son's/daughter's) fault due to failure to follow instructions, rules, and regulations.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT FOR MYSELF OR FOR MY CHILD AND I SIGN IT OF MY OWN FREE WILL.  
(For participants under 18, only one parent/legal guardian signature is required)

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Participant Date of Birth: \_\_\_\_\_

Participant Name (Print): \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Father  Mother  Legal Guardian (signature required for participants under age 18 at the time of this form)

Parent/Legal Guardian Name (Print): \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship to Participant: \_\_\_\_\_