



# Dutch Soccer Academy, LLC.

## Amateur Athletic Waiver and Release of Liability

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In consideration of being allowed to participate in soccer activities organized and run by Dutch Soccer Academy, LLC the undersigned Participant acknowledges, appreciates and agrees that:

1. There are inherent risks of injury when participating in soccer activities, which risks are significant, including the potential for permanent or serious injury including, but not necessarily limited to, cuts, bruises, concussions, dislocation of joints, broken bones, paralysis, and even death. While rules, equipment and personal discipline may reduce this risk, the risk of permanent or serious injury cannot be eliminated and does inherently exist;
2. **I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the Releasees or others, and assume full responsibility for my participation; and,**
3. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **hereby release, hold harmless and indemnify Releasees with respect to any and all injury, disability, death, loss or damage to person or property, whether arising from the negligence of Releasees or otherwise.**
4. I further authorize the Dutch Soccer Academy, LLC staff to call for emergency medical care for me and/or to transport me to a medical facility or hospital if it appears to the Dutch Soccer Academy, LLC staff that I require immediate medical attention. I further authorize appropriate personnel to render emergency medical treatment to me if necessary.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Full Name of Participant (Print): \_\_\_\_\_ Date: \_\_\_\_\_

Full Name of Parent/Guardian if Participant is Minor (Print): \_\_\_\_\_

Participant's Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature (parent/guardian if Participant is Minor - under age 18): \_\_\_\_\_