

Norfolk Express Soccer Club 2011

RELEASE OF LIABILITY

The undersigned parent/legal guardian of _____, recognizes that soccer is a vigorous sport and that the above-listed registrant may suffer temporary or permanent serious physical injury including, but not limited to sprains, fractures, brain or spinal damage, paralysis, or even death while playing soccer or attending a game, tournament, practice, or scrimmage. With full knowledge of the above-referenced risks, and in consideration for the United States Youth Soccer Association, the Nebraska State Soccer Association, and the Norfolk Soccer Club, Inc. and their member clubs and tournaments, I hereby accept and assume full responsibility for any and all harm caused by negligence and release, discharge, and/or otherwise indemnify the United States Youth Soccer Association and Norfolk Soccer Club, Inc. and their respective clubs, coaches, staff, directors, and officers, league and tournament sponsors and their directors and officers and any of their facilities utilized for soccer as to any claims and causes of action by or on behalf of the registrant and his or her parents/legal guardians, except to the extent any such claims and causes of action are fully covered by insurance procured by or on behalf of the United States Youth Soccer Association, the Nebraska Soccer Association and Norfolk Soccer Club, Inc. or their member clubs.

I have read and fully understand the above statements. I acknowledge that I am knowingly signing the Release of Liability for the above listed registrant.

Parent/Legal Guardian Signature: _____ Date: _____

THIS SECTION TO BE COMPLETED BY CLUB OFFICIAL

On File: Medical Release Yes ___ No ___

Copy of Birth Certificate Yes ___ No ___

Registration Fee: \$ _____

RECEIVED BY: _____ Date: _____