

# Norfolk Soccer Club 2010

## ***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	_____
Coaches Volunteer Information Release	Yes	_____	No	_____
Copy of Birth Certificate	Yes	_____	No	_____

Registration Fee: \$ \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_ Date: \_\_\_\_\_