

5V5 Individual Waiver of risk and waiver of liability

| TEAM NAME: | | _DATE | |
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| | DIVISION: | | |

THIS DOCUMENT MUST BE COMPLETED AND TURNED IN TO THE 5v5 PROGRAM DIRECTOR BEFORE PLAYING THE FIRST GAME

In consideration of being allowed to participate or in consideration of my child being allowed to participate, in any way in the PUEBLO RANGERS SOCCER CLUB, INC. 5v5 LEAGUE:

- 1. I agree that prior to participating, I will, or if I am a parent or guardian of a minor participant, I will instruct such participant that he or she should inspect the facilities and equipment to be used, and if I believe anything is unsafe, I will immediately advise my coach (if I am participating as an athlete) or supervisor of such condition(s) and refuse to participate.
- 2. I acknowledge and fully understand that I (or my child), may be engaging in activities that involve risk of serious injury, permanent disability, or death, and sever social and economic losses which might result not only from my own actions, inactions or negligence by actions, inaction or negligence of others, the rules of play, or the conditions of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
- 3. I assume all the forgoing risks and accept personal responsibility for the damages following any such injury, permanent disability, or death.
- 4. Intending to be legally bound, I do hereby release, waive, discharge and agree not to sue Pueblo Rangers Soccer Club, Inc., its affiliates, their respective administrators, officers, directors, agents coaches, and other employees or volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable owners and leasers of premises used to conduct the event, all of which are hereinafter referred to as "releases," from any and all liability to each of the undersigned, his or her heirs and next of kin for any claims, demands, losses, or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the release or otherwise in connection with association or entry in and/or arising out of my travel to, participation in, and returning from competition of the tournament.
- 5. In the event that I (or my child) sustain injury or illness while competing in the PUEBLO RANGERS SOCCER CLUB, INC. 5v5 LEAGUE, I hereby authorize any emergency first aid, medication, medical treatment, or surgery deemed necessary by licensed medical personnel. I also give my permission for attending medical personnel, including college trainers, to execute on my behalf my permission forms or other necessary medical documents and to act in my behalf if I am not immediately able to do so.
- 6. I hereby consent to allow my picture and/or voice likeness to appear in any official documentary, promotional, exclusive television, radio or film coverage of the PUEBLO RANGERS SOCCER CLUB, INC. 5v5 LEAGUE and without compensation to me.
- 7. I understand that the PUEBLO RANGERS SOCCER CLUB, INC. will not sell any of my personal information to third parties unless I give my consent.

Individual Player Wavier Information: 1. Player_____ Phone (____)_____ Gender (Circle): Male Female Birth date ____/___/ Age _____ I HAVE READ THE ABOVE WAIVER AND RELEASE AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY VOLUNTARILY SIGNING THESE DOCUMENTS. Waiver Signature (if under 18 must be parent signature) ______ Phone (____)____ Player____ Gender (Circle): Male Female Birth date ____/____ Age ___ I HAVE READ THE ABOVE WAIVER AND RELEASE AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY VOLUNTARILY SIGNING THESE DOCUMENTS. Waiver Signature (if under 18 must be parent signature) 3. Player Gender (Circle): Male Female Birth date / / Age I HAVE READ THE ABOVE WAIVER AND RELEASE AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY VOLUNTARILY SIGNING THESE DOCUMENTS. Waiver Signature (if under 18 must be parent signature) 4. Player_____ ______ Phone (____)___ Gender (Circle): Male Female Birth date / / Age I HAVE READ THE ABOVE WAIVER AND RELEASE AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY VOLUNTARILY SIGNING THESE DOCUMENTS. Waiver Signature (if under 18 must be parent signature) 5. Player_____ Phone (____)____ Gender (Circle): Male Female Birth date ____/___/ Age _____ I HAVE READ THE ABOVE WAIVER AND RELEASE AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY VOLUNTARILY SIGNING THESE DOCUMENTS. Waiver Signature (if under 18 must be parent signature) 6. Player______ Phone (____)____ Gender (Circle): Male Female Birth date ____/ ___/ Age I HAVE READ THE ABOVE WAIVER AND RELEASE AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY VOLUNTARILY SIGNING THESE DOCUMENTS. Waiver Signature (if under 18 must be parent signature)

| 7. | Player | Phone (|) |
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