TEAM NAME:

DATE:

CADENCE SOCCER & FUTSAL CENTER & CADENCE SOCCER MANAGEMENT, LLC
Waiver and Release

As consideration for being allowed to enter Cadence Soccer & Futsal Center and Cadence Soccer Management, LLC and/or participate in any party and/or program at Cadence Soccer & Futsal Center and Cadence Soccer Management, LLC, the undersigned, on his or her behalf, and on the behalf of the Participant(s) identified below, acknowledges, appreciates, understands and agrees to the following:

1. Agree that prior to participating, they each inspect the facilities and equipment to be used, and if they believe anything is unsafe, they will immediately advise their coach or supervisor of such condition(s) and refuse to participate.
2. I agree that I am voluntarily participating in these activities and using the facilities and assuming all risk of injury or my contraction of any illness or medical condition that might result therefrom or any damage, loss or theft of any personal property.
3. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of injury, including permanent disability and death, the severe social and economic losses which might result not only from their own action, inactions or negligence of others, the rules of play, or the conditions of the premises or of any equipment used.
4. Assume all the foregoing risks and accepts personal responsibility for the damages following such injury, permanent disability or death.
5. I agree to indemnify, defend and hold harmless Cadence Soccer & Futsal Center and Cadence Soccer Management, LLC (and its affiliates, employees, agents, representatives, successors, assigns and others) from all claims, losses, damages and causes of action to which they may be subjected arising from or relating to participation by User, Member, or the parent, spouse, child (minor or otherwise) or guest of User or Participant in any of the activities, or facilities or services we provide. Such indemnification will relieve Cadence Soccer & Futsal Center and Cadence Soccer Management, LLC of the consequences of its own actions, inactions or negligence. I further agree to accept full responsibility for the cost of treatment for any injury to Participant, or parent, spouse child (minor or otherwise) or guest of Participant.

I do hereby authorize Cadence Soccer & Futsal Center and Cadence Soccer Management, LLC and its assigns to utilize any and all photographs, pictures or other likeness of me or anyone assigned guardianship to me, as they deem appropriate in its promotional material or team films.

6. I am of physical ability to participate and legally competent to understand and complete this agreement. I hereby execute this agreement without coercion.

PLAYERS NAME	DATE OF BIRTH	PARENT NAME	CELL PHONE	EMAIL	PARENT/GUARDIAN SIGNATURE