Today's Date: _	
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WAIVER OF LIABILITY AND RELEASE FORM

This form must be completed by each soccer player before engaging in any activities. If the player or participant is under 18-years old, this form must be signed by the player's parent or legal guardian on the back of this page. No player, or other Granada Indoor Soccer participant, will be allowed to participate in any sports activities and/or games without this form having been properly executed and on file.
I,, in consideration for my voluntary participation in organized soccer, do hereby willfully acknowledge that:
 I understand the nature of Granada Indoor Soccer activities and that I am fully qualified, in good health, and in proper physical condition to participate in such activities. I understand soccer is a physical, contact sport that involves the risk of injury, loss or damage to me or my property, including the risk of death, or other unforeseen consequences; therefore, I assume all risks and hazards, including any and all medical expenses associated with my participation in the sport, and further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the activity. I will not compromise myself in such a way as to do harm at Granada Indoor Soccer to any individual or property. I agree to pay for any and all damages to any property or indemnities caused by me willfully, negligently, or otherwise. I authorize my photograph, video and voice to appear in any documentary, promotion (including advertising), television, social media, or radio coverage of the league or tournament, without compensation.
I hereby release, waive liability, discharge, hold harmless, indemnify, and promise not to sue Granada Indoor Soccer, their associated directors, administrators, officers, managers, employees, coaches, referees, volunteers, sponsors and advertisers, and other agents, including family members, for any and all liability incurred in the conduct of, and my participation in, their soccer programs.
By signing below, I agree that I have completely read this document and fully understand its contents. I acknowledge that I have given up substantial rights by accepting this document and that I do so voluntarily.
Full Name: Phone Number:

Signature:

*For those individuals under the age of eighteen (18) years old

As the parent and/or legal guardian of the participant named below, I hereby agree and certify that I have the legal capacity and the authority to act for, and on behalf of, the minor in the execution of this Waiver of Liability and Release.

Participant's Name:	Age:
Participant's Name:	Age:
Parent/Guardian (Print Name):	
Signature:	