Heavens Eleven Football Club Liability Waiver Form

Player's Last Name:			Player's First Name:						
Street:				City:			Prov	ON	
Postal Code:		Contact #:	DO		Age:		Sex	M	F
Players Email Address:									
Father:		Work Phone		Cell Phone #:					
Mother:		Work Phone		Cell Phone #:					
E-Mail Address:									
Emergency Contact:				Phone #:					
Doctor to Notify:				Phone #:					
List any Medical Problems:									

IMPORTANT
Please Read Before Signing:

I, as the parent or legal guardian responsible for the minor participant, acknowledge and assume all risks associated with the minor's involvement in Heavens Eleven Football Club (HEFC). This includes any risks arising from the minor's participation, even if such risks result from the negligence of HEFC, its coaches, team managers, other coaches, or volunteers. I accept full responsibility for the minor's participation.

I understand that playing soccer involves inherent risks due to the physical demands of the game, as well as potential hazards from the field, goals, balls, opponents, and collisions. I release and agree to indemnify and hold harmless HEFC, and its officers, directors, coaches, managers, and all volunteers, from all liabilities related to my minor's involvement in HEFC, including all soccer-related activities such as practices, games, tournaments, educational programs, clinics, seminars, and travel to and from HEFC events.

I further release and indemnify Ontario Soccer (OS) from any liability arising from my minor's participation in HFC and from use of any facilities associated with HFC programs.

In consideration of the benefits conferred upon me by my child's participation in HEFC, the adequacy and sufficiency of which I acknowledge, I hereby waive and release any and all rights to seek damages against HEFC and its officers, directors, coaches, and volunteers in any manner related to or arising from HFC and its contracted parties.

IMPORTANT

I, the parent/guardian of the registrant, a minor, agree that the registrant and I Consent to the above defined Waiver of Liability. Recognizing the possibility of physical injury associated with soccer and consideration for the HEFC accepting the registrant for its soccer programs and activities (Programs). I hereby release, discharge and/or otherwise indemnify the HEFC, its affiliated organizations and sponsors, their employees and associated personnel, including the registrant because of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize. I further grant the HFC Parties the right to use the player's name, pictures and /or likeness in printed, broadcast and other material concerning the Programs provided such use is related to the player's status as a participant in the Programs.

Name:_____

Parent/Legal Guardian (please print)

OFFICIAL USE ONLY

Birth Date Verified Yes No

Date _____