

Wycombe Futsal Registration Form 2017



Wycombe Futsal WAIVER OF LIABILITY

In return for my child (Participant) being allowed to participate in the Wycombe Futsal Association. I release and agree not to sue the program, its members, and their employees, sub-contractors, sponsors, agents, and affiliates from all present and future claims that may be made by the Participant or me, my family, estate, heirs, or assigns for property damage, personal injury, or wrongful death arising as a result of the Participants participation in the Program, and caused by the ordinary negligence of the parties listed above, wherever, whenever, or however the same may occur. I understand and agree that those listed above are not responsible for any injury or property damage arising about of the Program, even if caused by their ordinary negligence. I understand that participation in the Program involves certain risks, including, but not limited to serious injury. I am voluntarily allowing Participant to participate in the Program with knowledge of the danger involved and agree to accept all risks of such participation.

I certify that the participant is in excellent physical health and may participate in strenuous and hazardous physical activities, including football to be played in the Program. I also certify that the participant has permission to be transported by members of the program. Permission is granted for participant to receive emergency medical treatment, if needed. I also agree to indemnify and hold harmless those listed above for all claims arising out of Participants participation in the Program and all related activities.

I agree to let the parties use Participants name and likeness free of charge in any manner and for any purpose without compensation to Participant or me. I understand that this document is intended to be as broad and inclusive as permitted by the laws of the state in which the Program is taking place and agree that if any portion of the agreement is invalid, that the remainder will continue in full legal force and effect. I am the parent or legal guardian of the Participant. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies. I represent that I am parent/legal guardian of the child named above, and agree that the terms of this release are biding on me and the Participant.

Liability Clause I/we the Parents/legal Guardian of the above named Participant in the Wycombe Futsal Association hereby give my/our approval to their participation in any and all activities during the season. I/We assume all risks and hazards incidental to such participation, including transportation to and from all activities. I/We hereby waive, release, absolve, indemnify and agree to hold harmless the Wycombe Futsal Program, its organizers, sponsors, supervisors, board members, other participants, and any persons transporting the Participant, except the extent and in the amount covered by accidental or liability insurance. I give permission to Wycombe Futsal to photograph and film my child and use the graphics for marketing purposes.

Database consent

I/We by filling out the [online form](#) authorize Wycombe Futsal Association to input the named Participant's information into the Wycombe Futsal Association database. I/We understand that this information may have to be sent electronically and I/We will not hold Wycombe Futsal association responsible for the security of such transmission.