Parent/Guardian Agreement

Please read carefully and sign below. In consideration of registering my child (or dependent, if Guardian, both hereinafter referred to as "Participant") for all Youth Indoor Soccer Events at Mockingbird Valley Soccer Club (MVSC), I certify that the Participant is of nominal health and proper physical condition to participate in all Youth Indoor Soccer Events and has not been otherwise informed by a physician. On behalf of Participant, I acknowledge that I am aware of the risk inherent in participating in indoor soccer (both practice and competition); that indoor soccer is a physical sport which can require considerable running, starting, stopping, and physical exertion in heat and humidity, and could potentially lead to overheating and dehydration; possible limb injuries, possible permanent disability and death, and agree to assume all those risks and to waive any and all rights to claims for injuries, loss or damages arising out of the Participants participation in the Youth Indoor Soccer Leagues. I further certify that the Participant maintains adequate health insurance to cover any injuries occurring as a result of participation in all Indoor Youth Soccer Events at MVSC. In the event that I cannot be reached in an emergency, I hereby give my permission to the MVSC staff to secure emergency medical services, including transportation and physician.

Player Name (please print) **Parent Signature** **Date**

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