

# Consent to Treat and Release from Liability

## Adapted from Florida High School Athlete Association

This completed form will be kept on file by the club organization. This form is valid for the 2021-2022 season. This form is non-transferrable; a change of club organization during the 2021-2022 season will require re-submitting form to that club organization.

Club Affiliation: Florida Premier FC \_\_\_\_\_

Age Group: U- \_\_\_\_\_

### SECTION TO BE FILLED OUT BY PARENT/GUARDIAN

I know of, and acknowledge that my child/ward knows of, the risks involved in interscholastic athletic participation, understand that serious injury, and even death is possible in such participation and choose to accept any and all responsibility for his/her safety and welfare while participating in athletics. With full understanding of the risks involved, I release and hold harmless my child's/ward's club organization, the club organizations against which it competes, the contest officials and ECNL of any and all responsibility and liability for any injury or claim resulting from such athletic participation and agree to take no legal action against Florida Premier FC and the ECNL because of any accident or mishap involving the athletic participation of my child/ward. As specified by F.S. 1014.06(1), I specifically authorize healthcare services to be provided for my child/ward by a healthcare practitioner, as defined in F.S. 456.001, or someone under the direct supervision of a healthcare practitioner, should the need arise for such treatment, while my child/ward is under the supervision of the club organization. I further hereby authorize the use or disclosure of my child's/ward's individually identifiable health information should treatment for illness or injury become necessary. I consent to the disclosure to Florida Premier FC, upon its request, of all records relevant to my child/ward's health information that may be pertinent to athlete participation.

**I HAVE READ THIS CAREFULLY AND KNOW IT CONTAINS A RELEASE  
(Only one parent/guardian signature is required).**

\_\_\_\_\_  
Name of Parent/Guardian (printed)

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**I HAVE READ THIS CAREFULLY AND KNOW IT CONTAINS A RELEASE (athle**

\_\_\_\_\_  
Name of Athlete (printed)

\_\_\_\_\_  
Signature of Athlete

\_\_\_\_\_  
Date