



Accident Waiver / Release of Liability
Surf Soccer Center

IMPORTANT:

THIS IS A LEGAL DOCUMENT; PLEASE READ IN FULL AND UNDERSTAND BEFORE SIGNING

Participant:

NAME
DOB
Email:
STREET
CITY STATE
ZIP
PHONE

Guardian:

NAME
Email:
STREET
CITY STATE
ZIP
PHONE

EMERGENCY CONTACT: NAME: PH#

IN CONSIDERATION OF (myself/my child/ward), being allowed to participate in any way at Surf Soccer Center, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

- 1. The risk of injury to my child/ward from the activities involved in these programs is significant...
2. I FOR MYSELF, SPOUSE, AND CHILD/WARD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS...
3. I willingly agree to comply with the program's stated and customary terms and conditions for participation...
4. I for myself, my spouse, my child/ward, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Surf Soccer Center...
5. I, for myself, my spouse, my child's/ward, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my child's/ward involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PARENT/GUARDIAN SIGNATURE PRINT NAME DATE

UNDERSTANDING OF RISK I understand the seriousness of the risks involved in participating in this program, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

PARTICIPANT SIGNATURE PRINT NAME DATE