

Player liability waiver form

In consideration of my, or my child or ward's ("Child") participation in the Maryland Sports Arena Soccer Program, I, the undersigned, on behalf of my Child, myself, and/or my heirs, hereby release and forever discharge the Entities (defined below) from any present and/or future claims (excepting willful and gross negligence claims) including but not limited to claims for physical or mental injury, death, and/or economic injury to me or my Child, which pertain to and/or are ancillary to the activities associated with the Maryland Sports Arena Soccer Program (hereinafter Claims"). I understand and assume the risks inherent with playing soccer and have advised my Child of these risks.

I further agree to indemnify and hold harmless the Entities for Claims brought by me, my Child, my heirs or my Child's relatives against the Entities. This indemnification includes but is not limited to paying the Entities for any judgment or settlement amount paid or incurred by the Entities and payment of the Entities actual attorney's fees and costs in defending the Claim.

The term Entities means individually or collectively, the Maryland Sports Arena employees, staff, coaches, officials and volunteers.

PLEASE PRINT

Team name and Age Group _____

Player's name _____ Birthdate _____

Address _____

City _____ State _____ Zip _____

Cell or Home Phone _____ Email _____

Parent's Name _____

Parent's Signature _____