**Release and Waiver of Liability Agreement**

Release and Waiver of Liability Agreement for Soccer In consideration of allowing my child to participate in soccer training and related activities offered by Coach Flick, the undersigned, for himself/herself, his/her personal representatives, heirs and assigns agrees:

I consent to have my child participate in soccer training and related activities offered by Coach Flick. I fully understand that there is an inherent risk of injury in the sport of soccer and related activities. This release is valid for any and all classes, programs, events, and other related activities my child participates in, held at, or sponsored by Coach Flick and the fields on which these activities are conducted.

Coach Flick provides youth soccer training. Instruction takes place using equipment designed for soccer training and game play. As an extension of soccer training, participants may, at some point, take part in special events, demonstrations, and other related activities.

Should my child be injured while participating in soccer training or related activities, I give my consent and authorize employees/independent contractors of Coach Flick to administer emergency first aid required and to obtain medical attention including transportation by ambulance if the employee/independent contractor deems it needed.

I and my child fully understand that soccer and related activities involve motion, rotation, and speed, in a field play environment with others, and as such carry with them the assumption of risk. I and my child hereby assume full responsibility for and risk of bodily injury, death or property damage due to negligence of Releasees (as defined below) or otherwise, while training with Coach Flick and any of their leased fields or practice locations, including training, competing, observing, working or participating in activities. There are risks and dangers associated with participation in soccer and related activities including, but not limited to those of bodily injury, partial and/or total disability, paralysis, death and property damage. All of the risks and dangers associated with participating in the activities sponsored by Coach Flick are assumed notwithstanding.

I and my child hereby forever and fully release, waive, discharge, indemnify and agree to hold harmless Coach Flick, and its officers, directors, stockholders, employees, agents and independent contractors (each a Releasee and collectively the Releasees), from and against all claims, demands, causes of action and liability of every type and kind and nature whatsoever, for damage, loss, injury or death to any of myself and my participating child, or to any of my property or property of my child which results from participation in activities sponsored or held by, Coach Flick, whether such claim demand, cause or action or liability is based upon negligence, breach of warranty, breach of contract, product liability, or upon any other legal theory or basis of any nature whatsoever.

I hereby agree that this Release and Waiver Liability Agreement is intended to be as broad and inclusive as is permitted by the law of the State in which my child participates in activities held or sponsored by Coach Flick and that if any portion hereof is held invalid, it is agreed that the balance shall continue in full force and effect.

This Agreement is a legally binding contract and supersedes any other agreements or representations by and between these parties, written or oral, regarding the subject matter hereof, this document if intended to be full, and comprehensive release of liability.

Participants Name:

Parent/Guardian's Name:

Phone Number (Cell/Home): Email Address:

Street Address: City/State/Zip:

Emergency Contact Name/Relation:

Emergency Contact Phone:

Signature of Parent/Guardian: Date:

**Image and Photography Release**

**Check here and initial if you DO NOT consent to media participation during Coach Flick events and DO NOT consent to use in marketing or promotional marketing. If requested, video may still be taken to share with participant and parent/guardian only for training purposes. *If you select this, you do not have to complete the following section.* \_\_\_\_\_ Initials: \_\_\_\_\_**

**Consent and Release**

I, the undersigned, hereby grant permission to Coach Flick and its representatives, employees, or agents to take photographs, video recordings, and other visual and/or audio recordings of the minor named below during events, trainings, and activities organized by Coach Flick. I understand that these images or recordings may be used in various forms of media, including but not limited to:

* Online platforms (e.g., websites, social media)
* Print materials (e.g., brochures, flyers, posters)
* Promotional marketing materials

**Usage**

I further agree that the photographs, video, and/or audio recordings may be used for promotional purposes, advertising, and other business purposes related to Coach Flick's activities. This includes, but is not limited to, the right to edit, reproduce, publish, and distribute the images or recordings.

**Rights**

I understand and agree that:

1. I will not receive any compensation for the use of the images or recordings.
2. All photographs, video, and/or audio recordings, including the rights to use them, will remain the property of Coach Flick.
3. This release is irrevocable and is granted for an indefinite period.

**Waiver**

I hereby waive any right to inspect or approve the finished product, including written copy, that may be created in connection therewith.

**Release of Liability**

I release Coach Flick, its representatives, employees, or agents from any claims, demands, or liabilities that may arise in connection with the use of the images or recordings as described above.

**Acknowledgment**

I certify that I am the parent or legal guardian of the minor named above and have the legal authority to grant this consent and release.

**Participant/Minor’s Name:**

**Parent/Guardian Signature:**

**Date:**