



PLAYER WAIVER FORM

Individual Player Information

Name: _____ Gender: Male Female

Address: _____ City: _____

Province: _____ Postal Code: _____ Phone: _____

Email: _____

Emergency Contact: _____ Phone #: _____

Consent and Liability Waiver - Release of all claims (must be signed to participate)

As lawful consideration to participate in the APTitude Soccer Training Program, clinic or any other soccer related events, I, _____ (player), assumes any risks which might be associated with its activities. I agree that I will not make any claim against, sue, attach the property of or prosecute APTitude Soccer and their agents, sponsors, suppliers and employees for damages, death, personal injury or property damage which I may sustain as a result of participating in these sporting activities. This release is intended to discharge in advance APTitude Soccer and their agents, sponsors, suppliers and employees from and against any and all liability, including for negligent actions, arising out of or connected in any way with my participation in the soccer training, program, camp, clinic or any other activity. I FURTHER UNDERSTAND THAT SPORTS INVOLVE PHYSICAL CONTACT BETWEEN PLAYERS, THAT SERIOUS ACCIDENTS OCCASIONALLY OCCUR DURING SUCH SPORTING ACTIVITIES AND THAT PARTICIPANTS IN SUCH SPORTING ACTIVITIES OCCASIONALLY SUSTAIN SERIOUS PERSONAL INJURIES (INCLUDING DEATH) AND/OR PROPERTY DAMAGE, AS A CONSEQUENCE THEREOF. KNOWING THE RISKS OF PARTICIPATION, NEVERTHELESS, I HEREBY AGREE THAT I ASSUME THOSE RISKS AND RELEASE AND HOLD HARMLESS, APTITUDE SOCCER AND THEIR AGENTS, SPONSORS AND EMPLOYEES WHO (THROUGH



NEGLIGENCE OR CARELESSNESS) MIGHT OTHERWISE BE LIABLE TO ME (OR OUR HEIRS OR ASSIGNS) FOR DAMAGES. I attest that I am eighteen (18) years old or older and that I am physically fit and have no known medical conditions which prohibit participation in this sport. I agree to follow all laws, rules and guidelines regulating the conduct of the soccer training, camp or clinic.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY FOR MYSELF AND A CONTRACT BETWEEN MYSELF AND APTITUDE SOCCER AND THEIR AGENTS, SPONSORS AND EMPLOYEES AND I HAVE SIGNED IT OF MY OWN FREE WILL. I also agree that APTITUDE SOCCER and their agents, sponsors and employees may use my photograph, recordings and videos in future promotions including but not limited to social media, advertising and web content without any fees, royalty or compensation for such use.

Signature: _____ **Date:** _____

Print Name: _____