

FC Irvine "Academy" Emergency Contact / Waiver and Release Form



Player Name _____ Gender _____ Birth Date ____/____/____

Email _____

Phone Number (Day) (____) _____ - _____ Phone Number (Eve) (____) _____ - _____

In case of an Emergency and parent/guardian cannot be reached:

Contact _____ Relationship _____ Phone _____

Medical Insurance Company (REQUIRED)

Ins. Co. _____ Policy # _____ Group # _____

Insured Employer _____

WAIVER AND RELEASES

I understand that there are risks involved with my child's participation in the FC Irvine Academy. I hereby authorize the coaches of FC Irvine to act for me according to their best judgment in any emergency requiring medical attention. I hereby waive and release FC Irvine and the City of Irvine from all liability and agree to accept all medical expenses incurred. I know of no physical or mental problem that will affect my child's ability to safely participate in this clinic/tryout. I acknowledge and accept the conditions above with my signature below.

I certify that my child is in good health, and may participate in strenuous physical activities during the soccer session. I certify that there are no physical limitations to my child's participation in session. Permission is granted for my child to receive emergency medical treatment if needed. I hereby release and forever discharge FC Irvine and all their agents, employees and affiliated entities from any and all liability, claims, demands, and cause of action for personal injury or death, property damage, and/or other loss suffered by my child in connection with his/her participation in the clinic. I acknowledge and accept that this Release and Waiver is intended to be binding on the family, estate, heirs, executors, administrators and assigns of the minor named above. I further acknowledge and accept that this Release and Waiver is intended to be as broad and inclusive as permitted by the laws of the state in which the tryout is taking place and agree that if any portion of this release and Waiver is invalid, the remainder will continue to be in full force and effect. I agree that this Release and Waiver binds the minor and me to all of its terms.

PARENT'S SIGNATURE

_____/_____/_____
DATE