IWV SOCCER CLUB PRACTICE AND/OR TRYOUT MEDICAL AND LIABILITY RELEASE

As the parent or legal guardian of the child listed below, I give my permission for my children listed on the club registration record to participate in the IWV Soccer Club practice and/or tryouts to be held at a sanctioned field.

I am aware that soccer is a physically demanding sport in which injuries may occur, and hereby hold harmless form all claims of liability whatsoever the IWV Soccer Club, IWV Soccer Club Team, or coach and assistant coaches and any and all paid or volunteer officials or representatives of the above mentioned organization.

I further represent that my child is physically able to play soccer. Should my child be injured or become ill while participating in this soccer program, or related activities, I give my consent for on-field first aid, and for emergency medical treatment deemed reasonable and necessary by a doctor, and accept responsibility for any expense involved with such injury, illness, and treatment.