

Lincoln Christian University High School Indoor Soccer



Required Waiver and Release of Liability

I understand that there are risks involved in participating in an Indoor Soccer League. I agree that Lincoln Christian University shall not be liable for any injury I incur while participating in the High School Indoor Soccer League. I agree to assume all risks, and release and hold harmless Lincoln Christian University, their staff and their volunteers from all liability, claims, obligations, demands and damages of every kind which may arise out of my participation in the league.

I understand that participation is voluntary, and I freely choose to participate. I have read the above information thoroughly and voluntarily agree to the terms and conditions.

Dated this _____ day of _____, 20__

Printed name of Player

Signature of Player

Date of Birth

Printed name of Parent
(Must have if Player is under 18)

Signature of Parent
(Must sign if Player is under 18)

** This Form must be completed in order to participate*
*** Players without signed release waivers will not play*