



WAIVER RELEASE FORM - GOALKEEPERS ONE ACADEMY

Name: _____ Age: _____

Birth date: _____ Phone: _____

My signature below confirms and consents to the following:

I am fully aware and appreciate the risk, including the risk of catastrophic injury, as well as other damages and losses associated with participation in a sport activity. This includes "OPEN DAY, TRIAL CLASSES, BIRTHDAY PARTIES, **SOCCER PRACTICE** AND PRIVATE CLASSES" I further acknowledge and consent to my child being involved in a sport where there can be an accident or injury and will take full financial responsibility for any loss or damages. I further agree that **GOALKEEPERS ONE**, along with the employees, agents, officers and directors of this organization shall not be liable for any losses or damages occurring as a result of my child's participation in **SOCCER**. This includes " OPEN DAY, TRIAL CLASSES, BIRTHDAY PARTIES, AND **SOCCER PRACTICE**. I have read and understand the rules and policies and will follow and comply with all of them to the letter. I realize that failure to comply could mean my child's denial to participate at **GOALKEEPERS ONE** and/or its " OPEN DAY, TRIAL CLASSES, BIRTHDAY PARTIES, AND **SOCCER PRACTICE**. There will be no refund if a child is removed from " OPEN DAY, TRIAL CLASSES, BIRTHDAY PARTIES, **SOCCER PRACTICE**", for failure to follow the rules.

All participants must be signed in by a parent, legal guardian or other adult chaperone before they will be allowed in the soccer field. A note giving "permission to attend OPEN DAY, TRIAL CLASSES, BIRTHDAY PARTIES, **SOCCER PRACTICE** and holding the school HARMLESS" will suffice if you are not a member of **GOALKEEPERS ONE**. A member is such that child is enrolled in **GOALKEEPERS ONE**, has a release form on file and tuition has been paid and is current.

I also understand that **GOALKEEPERS ONE** retains the right to use any photographs, videotapes, motion picture recordings, or any other record of events for publicity, advertising, or any other legitimate purpose.

Parent /Guardian Printname _____

Signature of Parent/Guardian _____



GOALKEEPERSONE1@GMAIL.COM



(786) 599 95 08



@GOALKEEPERSONE