

Planet Futsal Inc.
2010/11 Youth Futsal League
Player Participation Agreement



Participant's:

First/Last Name _____

Date of Birth _____ Grade _____

Age _____ Sex _____

Address _____

City _____ State _____ Zip _____

Parent/Guardian Name _____ Team/Coach _____

Email Address _____

Mobile Number () _____ Work Number () _____

Home Phone Number () _____

Family Doctor _____ Dr. Number () _____

Emergency Name _____ Number () _____

Insurance Policy Provider _____ Policy # _____

Dentist Name _____ Number () _____

T-Shirt Size (Please Circle): **YS** **YM** **YL** **AS** **AM** **AL**

Waiver

I certify that my child is in excellent physical health, and may participate in strenuous and hazardous physical activities, including the soccer to be played under the direction of the Planet Futsal. I certify that there are no physical limits to my child's participation. I understand that accidents and injuries can arise from participation; knowing the risks, nevertheless, I hereby agree to assume those risks on behalf of the above named Minor and to release and to hold harmless all of the representatives of Planet Futsal. Permission is granted for my child to receive emergency medical treatment if needed.

In consideration of participation in the program offered above, I, the undersigned, as the parent/guardian of the Minor named above, agree to indemnify and hold Planet Futsal harmless and hereby waive, release and discharge any and all claims for damage, for death, personal injury, bodily injury or property damage which I and/or the Minor may have or which hereinafter may accrue to me and/or the Minor against Planet Futsal and may rise out of negligence or carelessness on the part of the persons mentioned above. Further, I have read and understand the rules and the code of conduct and agree to them. I agree to allow use of photographs of the Minor named above for publicity.

It is understood and agreed that this waiver, release and assumption of risks has been freely entered into and is to be binding on my heirs and assigns. I represent that I am a parent/guardian of the Minor named above and I agree that the grant and release contained therein binds me and the Minor to all its terms.

Parent/Guardian Signature _____ Date _____