



Parental Waiver and Consent Form

As the parent or legal guardian of the child named below, I hereby give my full consent and approval for my child to participate as a team member playing the sport of soccer at an event organised by the Howe Sound Soccer League.

I understand that there are certain risks of injury inherent in the practice and playing of soccer, as well as other related activities incidental to my child's participation, and I am willing to assume these risks on behalf of my child. I hereby certify that my child is fully capable of participating in the sport of soccer and that my child is healthy and has no physical or mental disabilities or infirmities that would restrict full participation, except as listed below.

In addition to giving my full consent for my child's participation, **I do hereby waive, release and hold harmless the Howe Sound Soccer League**, its officers, agents, sponsors, supervisors, and representatives for any injury that may be suffered by my child in the normal course of participation in an event organized by the Howe Sound Soccer League and the activities incidental thereto, whether the result of negligence or any other cause.

(Name of Child)

((Date of Birth))

(Street Address)

(Town)

((Province))

Please list any physical limitation (allergies, hearing, sight, etc.) _____

(Parent's Signature)

(Date)