PITTSBURGH PREMIER

Pro Soccer Training

Medical and Liability Waiver

Participant Information

First Name: _____ M.I. _____ Last Name: _____

Date of Birth: _____-_____-_____ Gender: _____

Terms and Conditions of Participation – Please Read Before Signing

In consideration of your minor child or ward being permitted to participate in the Event and activities provided by Pittsburgh Premier Soccer LLC, wherever the Event and/or activities may occur, you hereby attest that, after reading this Sports Waiver and Permission Form completely and carefully, you acknowledge that participation in the Event/Activity by your child or ward is entirely voluntary, and that you understand and agree as follows:

PHYSICAL CONDITION/MEDICAL AUTHORIZATION: I hereby certify that my child or ward is physically fit for participation in the event and/or activities provided by Pittsburgh Premier Soccer LLC or other activities conducted in conjunction therewith (the "Event/Activity") and has the skill level required in conjunction with the Event/Activity, and I have not been advised otherwise. I authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by the attending medical personnel if I am not able to act on my child's or ward's behalf. Additionally, I authorize medical treatment for my child or ward, at my cost, if the need arises; however, I acknowledge that the Released Parties shall have no duty, obligation or liability arising out of the provision of, or failure to provide, medical treatment. For the purposes of hereof, the "Released Parties" are Pittsburgh Premier Soccer LLC, its directors, employees, volunteers, sponsors, agents, representatives, and successors.

PUBLICITY: I further grant the Released Parties the right to photograph and/or videotape me and my child or ward and further to display, use and/or otherwise exploit my or my child's or ward's name, face, likeness, voice, and appearance forever and throughout the world, in all media, whether now known or hereafter devised, throughout the universe in perpetuity and in all forms including, without limitation, digitized images, whether for advertising, publicity, or promotional purposes, including, without limitation, without compensation or further approval and I agree to indemnify and hold harmless the Released Parties for any Claims associated with such grant and right to use.

_____	_____	_____
Date	Print Name of Parent or Legal Guardian	Signature of Parent or Legal Guardian

_____	_____
Phone	Email