



PARENTAL WAIVER AND RELEASE FOR A MINOR

The undersigned _____ (Parent/ Legal Guardian name) of _____
_____ (street address, city, county, state, zip code), on behalf of my
child, _____ (hereinafter referred to as Child) does hereby waive and release,
indemnify, hold harmless and forever discharge Futbol Abroad, LLC, a Limited Liability Company orga-
nized and existing under the laws of the state of California, with its principal office located in San Fran-
cisco, including its agents, employees, officers, directors, affiliates, volunteers, successors and assigns, of
and from any and all claims, demands, debts, contracts, expenses, causes of action, lawsuits, damages and
liabilities, of every kind and nature, whether known or unknown, in law or equity, that I or Child ever had
or may have, arising from or in any way related to Child's participation in any of the training, camps, or
related soccer or physical activities, conducted by, on the premises of, or for the benefit of, Futbol Abroad,
LLC, provided that this waiver of liability does not apply to any acts of gross negligence, or intentional,
willful or wanton misconduct. Futbol Abroad, LLC, its agents, employees, officers, directors, affiliates,
successors and assigns are hereby jointly and severally referred to herein as Released Parties. This waiver
and release includes (but is not limited to) any injuries to Child resulting from Child's participation in any
of the training, camps, or related soccer or physical activities conducted by Released Parties as well as
injuries resulting from engaging in fitness or strength and endurance workouts, practicing and/or engaging
in soccer round robins, tournaments, house leagues or other related activities.

I understand that the activities that said Child will participate in can be dangerous and may cause
serious or grievous injuries, including bodily injury and/or death. On behalf of myself, Child, my heirs,
assigns and next of kin, I and said Child waive all claims for damages, injuries and death sustained by me
that I or said Child may have against Released Parties regarding any such activity.

Child has the necessary and requisite skills to participate in all facets of, and activities of and
requested of Released Parties except as noted below. The nature of the activities has been fully disclosed
and any flyer, advertisement, or brochure relating to the participating activities is expressly made a part of
this Waiver and Release.

By this Waiver and Release, I, on behalf of said Child, assume any risk, and take full responsibil-
ity and waive any claims of personal injury or death associated with receiving soccer lessons, engaging
in fitness or strength and endurance workouts, practicing and/or engaging in soccer round robins, tourna-
ments, house leagues or other related activities conducted by Released Parties.

This Waiver and Release contains the entire agreement between the parties, and supersedes any
prior written or oral agreements concerning the subject matter of this Waiver and Release. The provi-
sions of this may be waived, altered, amended or repealed, in whole or in part, only upon the prior written
consent of all parties.

The provision of this Waiver and Release will continue in full force and effect even after the ter-
mination of the activities conducted by, on the premises of, or for the benefit of Released Parties, whether
by agreement, by operation of law, or otherwise.

I have read, understand and fully agree to the terms of this Waiver and Release. I understand and confirm that by signing this Waiver and Release said Child and I have given up considerable future legal rights. I have signed this Agreement freely, voluntarily, under no duress or threat of duress, without inducement, promise or guarantee being communicated to me. My signature is proof of my intention to execute a complete and unconditional Waiver and Release of all liability to the full extent of the law.

Medical Conditions

Child is subject to the following allergies or medical conditions, and I authorize Released Parties to disclose these conditions to a physician or other medical professional in the event said Child should require emergency medical care:

Prohibited Activities

As a result of the above-mentioned medical conditions, I, on behalf of Child, am prohibiting involvements in the following specific activities:

Date: _____ Name of Child: _____

Name of Parent/Guardian: _____

Signature of Parent/Guardian (X): _____

MEDICAL TREATMENT AUTHORIZATION AND LIABILITY WAIVER

I hereby give my consent to have an athletic trainer, coach, team manager, emergency medical technician, nurse, medical treatment facility, and/or doctor of medicine or dentistry or associated personnel provide the applicant/participant with medical assistance and/or treatment and agree to be financially responsible for the cost of such assistance and/or treatment. I understand treatment for injury will be based on information provided herein. I hereby authorize emergency transportation of the applicant/participant to a medical treatment facility should an individual listed above consider it to be warranted. I recognize the possibility of physical injury associated with soccer, and hereby release, discharge, and otherwise indemnify Futbol Abroad, their sponsors, and its affiliated organizations, and the employees and associated personnel of these organizations, against any claim by or on behalf of the soccer player/participant named above as a result of that player’s participation in Futbol Abroad and/or being transported to or from the same, which transportation I hereby authorize.

Date: _____ Name of Child: _____

Name of Parent/Guardian: _____

Signature of Parent/Guardian (X): _____

**AUTHORIZATION AND CONSENT TO PHOTOGRAPH AND
PUBLISH FOR A MINOR**

I, _____, authorize Futbol Abroad, LLC to photograph the minor listed below during Futbol Abroad tours, clinics, tournaments, practices, and trainings. I have the authority to and do consent to the use of such photographs or video (as well as the image or likeness) of the minor by Futbol Abroad, LLC, to be published on www.futbolabroad.com and other public materials produced by Futbol Abroad, LLC. I hereby allow Futbol Abroad, LLC to publish and/or use such photographs and video of my child for the purposes of advertising, marketing, or other media publications related to the normal course of business.

The minor and the undersigned parent/legal guardian understand that by execution of this agreement, I am relinquishing all my rights to such photographs and to any future compensation for publication, use or sell the same. All photographs, content, and recordings are the exclusive property of Futbol Abroad, LLC.

Date: _____ Name of Child: _____

Name of Parent/Guardian: _____

Signature of Parent/Guardian (X): _____

Phone #: _____ Address: _____

City: _____ Zip: _____