

Abbey Villa Soccer Club, Ltd. Membership/Consent Form/Release

_____	_____
Participant	Date of Birth (please attach copy of DOB certificate)
_____	_____
Age Group	Do you Play for a Town Team?
_____	_____
Mother or Legal Guardian	Telephones (home, work, cell)
	Email: _____
_____	_____
Father or Legal Guardian	Telephones (home, work, cell)
	Email: _____
_____	_____
Home Address	Emergency Contact
_____	_____
City, State, Zip Code	Physician Contact (name, telephone)
_____	_____
Medical Conditions/Include past injuries	Prescribed Medications

Consent To Club Rules

As a member of the Abbey Villa Soccer Club, Ltd., I agree to abide by the rules of the Club (including determinations by the Club as to playing time), Mass Youth Soccer, US Youth Soccer, its affiliated organizations and sponsors.

_____	_____	_____
Signature of Club Member	Signature of Parent/Legal Guardian	Date

Consent to Medical Treatment

As the parent or legal guardian of the above-named Club Member, a minor, I hereby consent to emergency medical care administered by a medical doctor, emergency medical technician, or registered nurse, to be given only when said professional deems necessary to preserve the life, health, or well-being of the Club Member.

_____	_____	_____
Signature of Club Member	Signature of Parent/Legal Guardian	Date

Waiver of Liability and Release

As the parent or legal guardian of the above-named Club Member, a minor, I understand the inherent risk of injury when participating in soccer activities, and I hereby release, hold harmless, and forever discharge the Abbey Villa Soccer Club, Ltd. (the "Club"), its coaches, volunteers, principals, employees, and agents (the "Releasees"), and each of them, from any and all injuries, damages, claims, demands, causes of action, judgments, and liabilities, in law or in equity, however arising, known or unknown, now and in the future and to the fullest extent permitted by law, against the Releasees and which may arise out of or as a result of the named Club Member's participation in Club activities, including their transportation from and to the location of Club activities, which transportation and participation I hereby authorize.

_____	_____	_____
Signature of Club Member	Signature of Parent/Legal Guardian	Date