

SOUTH BEND INDOOR SOCCER  
VOLUNTARY RELEASE-WAIVER-ASSUMPTION OF RISK  
AND FULL INDEMNITY AGREEMENT

The undersigned participant hereinafter referred to as the “undersigned” requests and is granted the revocable permission to enter upon the premises of South Bend Indoor Soccer, Inc., dba South Bend SoccerZone, hereinafter referred to as “Owner”, to participate as a player or a coach in said soccer games and/ or matches, and/or camps, and/or practices, and/or scrimmages, and/or other activities that may be conducted within the Owner’s premises. Said entry shall hereinafter be referred to as “revocable permissive entry”.

In consideration of the “revocable permissive entry”, onto the premises of Owner, the undersigned of himself/herself, all personal representatives executors, executrices, heirs next of kin, spouse, and assigns do hereby agree as follows:

1. The undersigned do hereby FULLY RELEASE, FULLY WAIVE, FULLY DISCHARGE, AND COVENANT NOT TO SUE, the operators or Owner, its officers, directors, shareholders, employees, agents, managers, attorneys, subsidiaries, independent contractors, successor or assigns, (hereinafter collectively referred to as “releasees”) and each of them, from any and all claims, and/or the ordinary negligence of released, and/or the strict liability, and/or the negligence of any third party or participant, which causes the undersigned injury, death, personal injury, bodily injury, property damages, or any other type or kind of injury, and/or loss, and/or damages. The undersigned hereby covenants to hold “releasees” harmless from and to fully indemnify “releasees” for any type or kind of damages, judgements, awards, or related expenses (including but not limited to releasees’ attorney fees and court costs) that “releasees” may incur as a result of the participation of the undersigned in any activity, and/or game, and/or match, and/or practices, and/or camps, and/or scrimmages, and/or leagues, conducted within Owner’s premises at any time.
2. The undersigned verifies that he/she is physically fit and sufficiently trained to play and compete in Owner’s leagues, camps, practices, games, scrimmages, matches and other activities and that the undersigned’s physical condition for participation in Owner’s leagues, camps practices, games, scrimmages, matches, and other activities has been verified by a licensed medical doctor during the last six months. The undersigned verifies that he/she has and shall maintain sufficient medical insurance to cover any and all medical, expenses that may arise from the undersigned’s participation in the Owner’s leagues, or other activities and undersigned does not, and shall not rely upon or look towards Owner and/ or the “ releasees”.
3. The undersigned ACKNOWLEDGES that there is INHERENT DANGER in the participation in any and all soccer activities including but not limited to games, matches, practices, camps, scrimmages, and other activities, which the undersigned appreciates and voluntarily assumes. The undersigned has inspected the Owner’s premises and THE UNDERSIGNED VOLUNTARILY ELECTS TO ACCEPT ALL RISKS CONNECTED WITH HIS/HER PARTICIPATION IN ALL SOCCER ACTIVITIES, AS DESCRIBED ABOVE. THE UNDERSIGNED HAS READ THIS DOCUMENT CAREFULLY AND FULLY UNDERSTANDS EACH AND ALL OF ITS TERMS. THE UNDERSIGNED UNDERSTANDS THAT IT IS A RELEASE OF ALL CLAIMS. THE UNDERSIGNED UNDERSTANDS THAT HE/SHE ASSUMES ALL RISKS INHERENT IN ALL SOCCER PARTICIPATION. THE UNDERSIGNED VOUNTARILY SIGNS HIS/HER NAME EVIDENCING HIS/HER ACCEPTANCE OF THE ABOVE PROVISIONS.
4. If a provision of this agreement is held to be illegal or invalid by a court of competent jurisdiction, such provisions shall be considered severed and deleted. Such severance and deletion shall not effect the validity of the remaining provisions of this agreement, which shall remain in full force and effect.

\_\_\_\_\_  
Player I.D. Number

5. This Voluntary Release-Waiver-Assumption of Risk and Full Indemnity Agreement shall be in full force and effect at all times during undersigned's participation in the soccer activities, of any kind or nature, and for whatever period of the time the undersigned participates in said activities, either continuously or from time to time, as the case may be.
6. Should any dispute arise pertaining to the terms of this agreement, or should any action be filed or commenced to enforce the terms of this agreement, the prevailing party shall be entitled to recover it's reasonable attorney fees and costs, whether or not such dispute proceeds to judgment.

Office Use Only:

I.D. Checked: [ ] By: \_\_\_\_\_

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Print Participants Name (Legibly)

\_\_\_\_\_  
Birth Date

Sex: M F

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City and State

Zip: \_\_\_\_\_

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Primary Telephone Number

\_\_\_\_\_  
Secondary Telephone Number

\_\_\_\_\_  
Other Telephone Number

\_\_\_\_\_  
Participants Signature

\_\_\_\_\_  
Team

\_\_\_\_\_  
Division

IF THE PARTICIPANT (PLAYER) NAMED HEREIN IS UNDER THE AGE OF EIGHTEEN (18) YEARS,  
COMPLETE BELOW:

I, participant's parent or legal guardian, hereby consent and affirm the foregoing VOLUNTARY RELEASE-WAIVER-ASSUMPTION OF RISK AND FULL INDEMNITY AGREEMENT on \_\_\_\_\_

\_\_\_\_\_  
(name of under-age participant)

on behalf of participant, myself, and participant's family and all other parties as stated above. By affirming and consenting to the Voluntary Release-Waiver-Assumption of Risk and Full Indemnity Agreement, it is my intention that terms of the document by and through my consent are as effective as if the participant were an adult rather than a minor.

\_\_\_\_\_  
Print Parent's or Guardian's Name Legibly

\_\_\_\_\_  
Parent's or Guardian's Signature