

## **MEDICAL RELEASE**

Acknowledgement, Release of Liability and Medical Consent for  
Participation in the ERIN SOCCER CLUB activities

The parent of legal guardian of player(s) named below, the "Registrant(s)", recognizes that soccer is a vigorous contact sport and the Registrant(s) may suffer temporary or permanent serious physical injury including, but not limited to, sprains, fractures, brain or spinal damage, paralysis or even death while playing soccer or attending a game, tournament, practice or scrimmage. The parent or legal guardian of the Registrant(s) recognizes the types of injuries and harm mentioned in the preceding sentence of this Release can arise from a wide spectrum of causes in regard to the sport of soccer including, but not limited to: head injuries suffered by players impacting each other, goalposts or the ground; players getting hit by motor vehicles in the parking lots or roads near fields; violent or overly rough play; playing in weather that may be too dark, too hot, too wet, or too slippery; player fights; injuries caused by poor field conditions including potholes, protruding sprinkler heads, holes or the like; lightning; or negligence or misconduct by coaches, parents, referees, or other players. The parent or legal guardian further acknowledges and understands that travel to and from games, practices and tournaments by motor vehicle or other means of transportation may be necessary and that such travel carries with it inherent risks of injury. With full knowledge of the above referenced risks, and pursuant to the recreational assumption of the risk statute, sec. 895.525, Wis. Stats., the Registrant(s) and I hereby accept and assume full responsibility for any and all harm caused by negligence, and release, discharge, and/or otherwise indemnify the Erin Soccer Club, Kettle Moraine Soccer League, coaches and staff, directors and officers, league and tournament sponsors and their directors and officers and any of their facilities utilized for soccer as to any claims and causes of action based allegations of negligence by or on behalf of the Registrant(s) and his or her parents or legal guardians. This release includes transportation to and from soccer games and tournaments, which I hereby authorize.

This Release shall remain in effect from the date it is signed on the page through the start of next year's fall soccer season and shall be interpreted under Wisconsin law.

With full knowledge of the risks of injury in the game of soccer, I hereby authorize the following persons to administer emergency medical treatment to my child(ren), the Registrant(s), for any injury or other medical emergency while at practice, game, tournament, scrimmage, or while attending or traveling to or from any of those activities. All coaches and managers of my child(ren)'s team; all officers and officials of the soccer club to which my child(ren)'s team belongs; and all directors, officers, sponsors, officials or agents of any league or tournament that my child may participate in.

This extends the right to those persons listed above to arrange for immediate medical treatment by a licensed physician and/or other trained medical personnel, and for them to provide such emergency medical care as they deem appropriate to preserve the life or well-being of my child(ren).

My child and I hereby release, hold harmless and indemnify the above-listed persons for any injury or damage related to administration of medical care as authorized herein.

The Consent for Medical Treatment is in effect from the date it is signed below on this page through the start of next year's fall season and shall be interpreted under Wisconsin law.

I have read and fully understand the above statements.