



Arvada Soccer Association dba Real Colorado EDGE Soccer Club

WAIVER/RELEASE LIABILITY FORM

PLEASE READ FULLY AND CAREFULLY BEFORE SIGNING

In consideration for the permission granted to us and our family to visit and/or participate in activities, sports leagues, practices, fitness training sessions, or any other reason for which our attendance may be required at or in Arvada Soccer Association dba Real Colorado EDGE Soccer Club Warehouse Training Area / "Futsal Court" (4955 Miller Street, Wheat Ridge, CO), the undersigned responsible adult(s) or parent/guardians hereby irrevocably and unconditionally release and waive all claims of any nature now and hereafter existing whether known or unknown against Arvada Soccer Association and all of their respective employees, officers, partners, directors, sponsors, building owners or affiliates (COLLECTIVELY, "Indemnities") resulting in whole or part from participation in activities, practices, viewing of games or practices or casual visitation of the undersigned and/or their children in such activities at, in or around the warehouse training area, **INCLUDING ANY AND ALL SUCH CLAIMS THAT ARISE IN WHOLE OR PART DUE TO NEGLIGENCE OF ANY OF THE IDEMNITIES.**

I grant Arvada Soccer Association my permission to photograph, videotape, and/or audiotape myself (if over 18 years of age) or my child during activities at Warehouse Training Area / Futsal Court. These photographs/videos/audios will remain the property of Arvada Soccer Association and may be used in advertising or marketing campaigns on Arvada Soccer Association's websites, and for promotional and informational material including, but not limited to, flyers, brochures, newsletters, emails, advertisements, newspaper articles, TV or cable interviews/promotions. I understand my child will not be identified by name unless I give my express permission. I hereby waive and release on behalf of my child, any rights to compensation for, or ownership of, such images and/or sounds.

This waiver/Release from liability is to remain in effect for a period of (1) year from the signing date. **BY OUR SIGNATURES BELOW WE STATE AND VERIFY THAT WE ARE OVER THE AGE OF EIGHTEEN (18), or the parents or guardians of the indicated minor: Have read and fully understand the foregoing waiver/release as a full release of liability.**

Print Player/Participant Name

Player or Parent Signature

Player DOB

Print Player/Participant Name

Player or Parent Signature

Player DOB

DATE: _____