



Michigan State Youth Soccer Association

RELEASE OF LIABILITY FOR YOUTH SOCCER - PLEASE READ BEFORE SIGNING

IN CONSIDERATION OF the child/adult named below being permitted to participate in activities and events under the jurisdiction of the Michigan State Youth Soccer Association (MSYSA), the undersigned acknowledges, understands, and agrees to the following:

1. The risk of injury and/or illness from activities involved in youth soccer is significant, including the potential for permanent paralysis and death; while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist.
2. The risk to have direct or indirect contact with individuals who have been exposed to or diagnosed with a communicable disease, including but not limited to COVID-19 or other medical conditions, diseases, maladies, or variations thereof, does exist and it is impossible to eliminate the risk that this child/adult could become infected through contact with or close proximity to an individual with a communicable disease.
3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, and assume full responsibility for this child/adult's participation in youth soccer.
4. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual, significant hazard during my presence at activities and/or events under the jurisdiction of the MSYSA, this child/adult will discontinue participation and bring such hazard to the attention of the nearest official immediately.
5. This child/adult, and on behalf of my/our heirs, assigns, personal representatives, and next of kin, HEREBY RELEASE AND HOLD HARMLESS Michigan State Youth Soccer Association, their officers, officials, agents, employees, volunteers, other participants, affiliated leagues and clubs, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the events ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, to this child/adult, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of Participant: _____

Date of Birth: _____

Signature of Participant: _____

Date Signed: _____

FOR PARENT(S) OR GUARDIANS OF MINORITY AGE YOUTH PARTICIPANTS

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against injuries and illnesses (including communicable diseases). Furthermore, my/our child/ward understands and accepts these risks and responsibilities. I for myself, the other parent, and child/ward do consent and agree to his/her release provided above for all the Releasees. I, the other parent, and my/our child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my/our minor child's/ward's presence or participation in youth soccer activities as provided above, to the fullest extent provided by law.

Name of Parent/Guardian: _____

Name of Parent/Guardian: _____

Parent/Guardian Signature: _____

Parent/Guardian Signature: _____

Date signed: _____

Date signed: _____

(This release/waiver is in compliance with MCL 700.5109)