

**Print & Bring signed paper copy for each player to registration**

Friends of Brookline High School Soccer  
Annual 3 on 3 "Street Soccer" Tournament  
June 17 and 18, 2017 Liability and Consent Form

**Team Name:** \_\_\_\_\_ **Grade/Gender:** \_\_\_\_\_

***Release of Liability and Consent for Medical Treatment*** I, as parent or legal guardian, do hereby give my consent for my child, (fill in child's name in below), to participate as a player in the Annual 3 on 3 "Street Soccer" Tournament. I understand and acknowledge that there is a risk of personal injury in soccer competition, and in recognition of those risks to hereby release, hold harmless and indemnify Brookline High School, Friends of Brookline High School Soccer, their officers, directors, coaches, and designated officials from all claims, causes of action and any and all liability which may result, directly or indirectly, from my child's participation in this Tournament. I further hereby give consent for my child, fill in child's name in below list), to receive emergency treatment, which may be deemed advisable in the event of an accident or illness during this Tournament. I understand that, if possible, I will be notified by telephone of any emergency treatment required.

***Player and Spectator Conduct*** This tournament is run by high school students who are developing skills as well through this process. I, as parent or legal guardian, will along with my player and spectators follow Zero Tolerance guidelines for participant behavior during the tournament, and limit sideline comments to being supportive and encouraging of all players

Player Name: \_\_\_\_\_

Player Date of Birth: \_\_\_\_\_

Emergency Contact#: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_