

CSC “Just for Fun” Soccer Tournament RELEASE OF LIABILITY FORM

Parents/guardians and participants hereby acknowledge that participation in soccer competition carries with it potential hazards, including, but not limited to injury or the contraction of infectious diseases, specifically coronavirus/COVID-19. I, the parent/guardian and the participant therefore release the Cumberland Soccer Club, its teams, coaches, officers, directors, and officials of the Tournament, and their officers and participants, the town of Cumberland and its officials from any and all liability in the event of any injury or contraction of coronavirus/COVID-19 during the 2025 CSC “Just for Fun” Soccer Tournament.

Participants Signature: _____ DOB: _____

Team Age and Club Affiliation: Boys/Girls U-____ on Club: _____

Parent/Guardian Signature: _____ Date: _____

Consent for medical emergency medical aid and medical treatment

I hereby give consent for my child, _____ to receive emergency medical treatment which may be deemed advisable in the event of injury, accident or illness during the 2025 Cumberland Soccer Club “Just For Fun” Soccer Tournament, August 30th and 31st, 2025, and thereafter, as may be deemed necessary, including being admitted to any hospital or medical facility for diagnosis and treatment. I hereby authorize physicians, dentists and staff, including technicians and nurses, to perform diagnostic and treatment procedures, operative procedures and X-ray treatment of the above named child as they may deem appropriate and necessary in the circumstances.

Medical Information

Known Allergies: _____

Known Medical Problems: _____

Health Insurance & Policy: _____

Personal Physician: _____

I understand that, if possible, I will be notified by telephone of any emergency treatment required.

Parent/Guardian Signature: _____ Date: _____

Address: _____

Home Telephone: _____ Alternate Telephone: _____