

**CHOCOLATE CITY 3 –vs – 3 INDOOR SOCCER INVITATIONAL
PLAYER WAIVER FORM**

Player's Name: _____ Phone Number: _____
Street Address: _____ City/State/Zip _____

This is to certify that my son/daughter has my permission to participate in the indoor soccer tournament at Burlington H.S. I agree to indemnify, save and hold harmless the Burlington Area School District, BYSC, the tournament director, and any other personnel against, any and all claims, losses, damages, cost, expenses, actions and demands of whatever kind of nature that may result from or arise out of my child's participation.

Parent/Guardian Information In Case of an Emergency:

Parent/Guardian Name _____ Emergency Phone # : _____

Parent Signature _____ Date _____

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