



Charlotte United FC 2017 Camp Release



Player Name: _____

Parent/Guardian Name: _____

Camp: _____

Camp Dates: _____

In consideration of your acceptance of me or my child as named above as a participant in Charlotte United Futbol Club, Inc. ("CUFC"), I hereby waive, release absolve, indemnify and agree to hold harmless: CUFC, including its members, directors, officers, organizers, sponsors, coaches, referees, supervisors, participants, volunteers, vendors and persons transporting my child to or from activities from and against any claim for liability, expense, damages, causes of action, injury or harm suffered by me or my child incidental to, connected with or arising out of CUFC activities. I give my approval to my child's participation in all activities described above and/or listed in prior mailings, handouts and websites. I understand that the program described for which I give my permission may be hazardous and that injuries may occur in the normal course of play or instruction, and I assume all risks and hazards incidental to me or my child's participation, including transportation to and from CUFC activities.

I understand and authorize that camp rosters will be distributed to coaches with personal information including but not limited to parent and player names, addresses and phone numbers. I understand and authorize that team photos including names may be published in, but not limited to, local newspapers, tournament programs, websites and CUFC promotional materials.

I agree that we will abide by the by-laws, rules, procedures, and decisions as adopted from time to time by CUFC and/or its agents.

Registration for camps is only complete upon receipt of the camp fee. There is no refund of camp fees without approval of CUFC.

I certify to the best of my knowledge that my child has no physical infirmities or allergies except as noted:

(Please list any condition(s) of which you or your doctor is aware)

I understand that no medical or health insurance coverage is provided by CUFC and that I, as parent/guardian of my child, am responsible for all medical and insurance costs. Further, I hereby consent to emergency medical care for my child.

I hereby represent that I have read and understand the above and have been given an opportunity to ask questions, and if so, they have been answered satisfactorily. I hereby execute this Release and Understanding fully and with no reservations.

Signature of player (parent or guardian if under 18 years of age)

Date