



REAL BRAZILIAN SOCCER WAIVER FORM

Name of Player: _____

Age : _____ Date of Birth: ____/____/____

Name of Parent/Guardian:

Address: _____ City:

_____ State: _____ Zip: _____

Phone: _____ Email Address:

This form must be signed and read before the participant takes part in any clinic, camp, try-out, testing, training or competition. By signing this form the parent or legal guardian of the participant, or the participant themselves, affirms having read it and acknowledges and understand its terms, and sign it freely and voluntarily without inducement.

On my own behalf and on the behalf of participant, my heirs, successors and assigns, I hereby forever release and discharge and agree to indemnify REAL BRAZILIAN SOCCER EXPERIENCE , and its related entities (collectively "RBSE") each of their officers, Directors, Employees, Agents, Shareholders, Members, Partners, Representatives, and all owners and Operators of all sites at which "RBSE" conduct try-outs, clinics, practices, camps, testing, competition or games, and their respective affiliates, and all the representatives (collectively the "released parties") from any and all injury, damage, loss, demands or causes of action, whether known or unknown ("claims") that I may now or hereafter have arising out of my or participants participation in "RBSE", or any "RBSE" related activity including without limitation clinics, try-outs, games and training sessions.

I understand and acknowledge that dangers of personal injury are inherent in participating in soccer try-outs, clinics, practices, camps, testing, competition or games, and I expressly and voluntarily assume all risk related thereto, including without limitation, death or personal injury sustained in the clinics, try-outs, games and training sessions, as well as the risks incurred in all these activities and those arising from hidden, latent or obvious defects in any facilities or equipment used. I acknowledge the possibility that my successors or I may not fully know the number or magnitude of all claims, and agree that this release is a full and final release of all claims. This release is intended to be binding on my heirs and assigns. This release is being signed in consideration of the opportunity to play for "RBSE" teams and is governed by Massachusetts State law.

Parents/Guardian Signature:

_____/_____

Date: ____/____/____

**REAL BRAZILIAN SOCCER EXPERIENCE - TEL (617) 285-3349 - EMAIL:
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www.REALBRAZILIANSOCCER.COM