

AMERICAN YOUTH SOCCER ORGANIZATION

Youth Volunteer Form

My Name is:	First Name		MI	Last Name	
I live at:	Address Line 1				
	Address Line 2				
	City		State	Postal Code	
My phone # is	Area Code	Phone		E-Mail	
National/ ID	Social Security		Birthday		Gender
					<input type="checkbox"/> Male <input type="checkbox"/> Female

Contact Information

School	Name			Phone
Emergency	Name			Phone
Medical	Name			Phone

Guardian / Parent Information

First Name		MI	Last Name			
Address Line 1			Area Code	Phone		
City		State	Postal Code		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
First Name		MI	Last Name			
Address Line 1			Area Code	Phone		
City		State	Postal Code		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female

Release and Authorization

EMERGENCY AUTHORIZATION: I, the undersigned parent or legal guardian of the above volunteer, a minor, hereby authorize an AYSO adult volunteer, the above identified Emergency Contact and/or other AYSO officials to act as my agents in the capacity of authorizing medical, surgical or dental examination and/or treatment.

DISCLAIMER, ASSUMPTION OF RISK AND WAIVER: I, the undersigned parent or legal guardian of the above volunteer, a minor, for myself and on behalf of the above volunteer, our heirs, assigns, and next of kin, acknowledge that participation in soccer necessarily involves travel, play in adverse field conditions, contact with considerable force, and risk of severe, permanent physical injury including bruises, scrapes, strained, sprained or torn muscles, tendons or ligaments, broken bones, dislocation of joints, concussion, brain damage, nerve and spinal cord injury, paralysis and death. For myself, and on behalf of the above player, our heirs, assigns and next of kin, we willingly and voluntarily accept and assume all such risk.

For myself and on behalf of the above volunteer, a minor, I further acknowledge that the American Youth Soccer Organization (AYSO) is primarily administered by volunteers rather than paid professionals. For myself and on behalf of the above volunteer, a minor, he/she and I willingly and voluntarily agree to comply with the stated and customary terms and conditions for participation and, if he/she or I observe any unusual significant concern in his/her readiness for participation and/or in the program itself, I will remove his/her from participation and bring such concern to the attention of the nearest official immediately and also of the regional commissioner as soon as possible thereafter.

In consideration of accepting and permitting the voluntary participation of the above named volunteer, a minor, in its programs, I and on behalf of the above volunteer, our heirs, assigns and next of kin, hereby release, discharge and agree to hold harmless AYSO, its employees, volunteers, officials, sponsors and other representatives and any and all owners, lessors or other persons or entities from any and all claims, demands, costs, expenses and compensation arising out of or in any way related to any injury to other damage that may result to said volunteer participating in or present at any AYSO sponsored event, including any physical or other injury caused by the negligence or any person or entity described above.

ACKNOWLEDGEMENT AND CONSENT: I acknowledge receipt of the Soccer Accident Insurance pamphlet and I understand the terms of the Plan. For both internal and external use, I acknowledge that AYSO may compile and use addresses and soccer photographs of the named individual. I consent to such uses and hereby waive all rights to compensation.

I HAVE READ THE ABOVE EMERGENCY AUTHORIZATION, DISCLAIMER, ASSUMPTION OF RISK AND WAIVER, AND ACKNOWLEDGEMENT AND CONSENT AGREEMENTS, FULLY UNDERSTAND THE TERMS OF EACH, UNDERSTAND THAT I AND THE ABOVE VOLUNTEER HAVE GIVEN UP SUBSTANTIAL RIGHTS BY MY SIGNING THIS FORM AND AGREEING TO THESE TERMS AND I SIGN THIS FORM AND AGREE TO THESE TERMS FREELY AND VOLUNTARILY AND WITHOUT INDUCEMENT FOR MYSELF AND ON BEHALF OF THE ABOVE PLAYER.

Guardian

Date