



# TFHV Community, Inc

## Waiver and Liability Agreement

### Participant Information:

- Full Name: \_\_\_\_\_
- Date of Birth: \_\_\_\_\_
- Parent/Guardian Name: \_\_\_\_\_
- Emergency Contact Number: \_\_\_\_\_

By signing this Waiver and Liability Agreement, I acknowledge that I have read, fully understand and agree to all of its terms and conditions, including permission to treat agreement. The participant named above voluntarily participates in youth soccer activities organized by TFHV Community Inc.

1. Assumption of Risk: I understand that soccer involves physical activity and inherent risks. I assume all risks associated with participation, including but not limited to injuries, falls, collisions, and other soccer-related incidents.
2. Medical Treatment Authorization: In the event of an injury or medical emergency, I authorize the TFHV staff to seek medical treatment for me/my child. I understand that every effort will be made to contact the emergency contact listed above.
3. Release and Indemnification: I release and hold harmless TFHV Community Inc., its organizers, coaches, volunteers, and sponsors from any liability for injuries, damages, or losses arising from my participation in youth soccer organized by TFHV Community Inc.
4. Photography and Publicity Release: I grant permission to TFHV Community to use photographs or videos of me/my participant for marketing and promotional purposes.
5. Code of Conduct: I agree to abide by the TFHV Community Code of Conduct, treating fellow participants, coaches, and staff with respect.

Parent/Guardian Signature (or Parent/Guardian if minor):

Signature: \_\_\_\_\_

Date: \_\_\_\_\_