

Breakaway Soccer Camp 2011
Release of Liability

I hereby covenant and agree to hold harmless Breakaway Soccer Camp, and Vineyard Christian Fellowship at the Barn, their agents, employees, and volunteer assistants at all times during the terms of this agreement or any hold-over period for any and all claims, losses or demands for injuries or death to persons and / or damages to property arising from my (or my child's) involvement with Breakaway Soccer Camp, including reasonable attorney fees and costs.

Child's Name: _____

Parent or Guardian: _____

Parent/Guardian Signature: _____

Date: _____

Consent for Treatment

In case of emergency, I/we hereby agree to the performance of such treatment as the doctor may deem necessary. I/we also accept full responsibility for expenses related to medical care.

Insurance: _____

Policy # _____

Parent's daytime # _____

Evening # _____

Emergency contact Name and # _____

Please list all medical conditions that Breakaway Soccer Camp should be aware of:

Parent/Guardian Signature _____ Date _____