

## **SEVEN MILE SOCCER WEEK 2024**

## Parental Authorization, Consent and Release

I wish for my child to participate in the Soccer Week activities hosted by Seven Mile Road Church, from June 24th - 28th 2024 at James P. Falzone Field, Waltham, MA.

Please print all answers legibly. Do not leave any blanks. If the answer is none, then write "none" in the space provided.

Student's Name		Age Grade
Address		
Email Address		
Parent/Guardian		
Phone-(H)	(W)	
Emergency Contact	Phone	
Person(s) authorized to pick up or t	take custody of the child/student, other than the Parent/C	
In supervising my child, Seven Mile Ro	oad Church should be aware of the medical condition or specia	al needs of my child as follows:
To be completed by the parents or leg	gal guardians of students under 18 years of age.	
I, the p	parent/legal guardian of, a mino (Student Name)	or ("Child"), hereby acknowledge and agree:

- 1. My Child may participate in Seven Mile Soccer Week.
- 2. I certify and affirm that I have been completely and thoroughly informed that my child will participate in certain activities which carry with them a degree of risk and danger. Examples of risky and dangerous activities, and hazards both foreseeable and unforeseeable include, but are not limited to:
  - outdoor physical activities;
  - sports, both informal and organized;
  - use of recreational equipment;

These risks and hazards may result in serious physical injury, sickness, or death, and damage to, loss, or destruction of property, and no guarantee can be made that Seven Mile Road Church or others can provide assistance if any of the foregoing result.

- If my Child is injured or needs medical attention while participating in Soccer Week, I give Seven Mile Road Church, its employees
  and volunteers, permission to seek medical diagnosis and treatment which in their best judgment they deem to be necessary or
  appropriate under the circumstances.
- 4. In cases of emergency, I further consent to the examination or treatment of my child by a physician duly licensed to practice medicine in the State of Massachusetts or any health care professional duly licensed to provide health care services in the State of Massachusetts for medical care and services deemed necessary by Seven Mile Road Church, its agents, servants, and employees.
- 5. I give permission to the Doctor or health care professional to provide any and all medical care they deem, in their professional opinion, to be necessary.
- 6. I agree to pay for any and all medical expenses incurred as a result of the use of this consent.
- 7. I also agree to fully release and hold harmless Seven Mile Road Church, its employees, and other workers, paid or volunteer, or their heirs and assigns, from any and all injuries, claims, liabilities or causes of action which may arise from the participation of my Child in the Soccer Week
- 9. I consent to my child's participation in these activities. I acknowledge and understand that this PARENTAL AUTHORIZATION, CONSENT AND RELEASE has the same force and effect regardless of whether the activities engaged in are free or if a fee is charged.
- 10. Further, I personally assume, on my child's behalf, all risk in connection with said activities for any harm, injury or damages that may befall my child as a result of my child's participation in the activities, whether foreseen or unforeseen, and I still wish to allow my child to proceed with the activities.

- 11. In consideration of my child being allowed to participate in these activities and to use Seven Mile Road Church's equipment, on behalf of my child, I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Seven Mile Road Church from any and all claims, demands, or causes of action, which are in any way connected with my child's participation in these activities or use of the Church's equipment, whether owned or offered for use by various church members and/or volunteers.
- 12. I understand that it is my obligation to inform the management of Seven Mile Road Church of any and all health considerations or medical conditions that would restrict my child's participation in Soccer Week.
- 13. I acknowledge that I am not aware of any condition or limitation that would dictate not having my child participate in the Soccer Week. I will not allow my child to participate in the Soccer Week should I become aware of any such condition or limitation and will not allow my child to participate in the Soccer Week should s/he have any illness or disease which I reasonably understand to be contagious to others or would put others in jeopardy of contracting such illness or disease.
- 14. Should the need for medical attention arise, Seven Mile Road Church will attempt to contact you, as soon as practicable under the circumstances.
- 15. By signing this document, I acknowledge that if anyone is hurt or property is damaged during my child's participation in these activities, I may be found by a court of law to have waived my right to maintain a lawsuit against Seven Mile Road Church on the basis of any claim from which I have released them herein.
- 16. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.
- 17. I consent to the use of my child's photograph, likeness, image, voice or performance on the Church's internet website, CD or DVD labels, video tape or film clips, advertisements or other officialChurch publications at the sole discretion of the Church and to be used in whole or in part of any and all broadcasting, audio/visual, and/or exhibition purposes in any manner or media, in perpetuity, throughout the world.
- 18. I have fully informed myself of the contents of this PARENTAL AUTHORIZATION, CONSENT AND RELEASE by reading it before I signed it.

Parent and/or Legal Guardian		Date	
-	(Signature)	, , , , , , , , , , , , , , , , , , ,	
	(Printed Name)		