Stewart's Creek Lady Red Hawks

2016 3v3 tournament



Player Name:		
Team Name:		
Birth Date:		
This waiver is made	e to allow my child to participate in	the Stewart's Creek High S
3v3 Tournament of	n May 18 th 2016. I recognize that my	signature on this waiver

This waiver is made to allow my child to participate in the Stewart's Creek High School Ladies Soccer 3v3 Tournament on May 18th,2016. I recognize that my signature on this waiver is a condition of your permitting my child to participate.

I understand that there are risks to injury involved in participating in such an event and hereby release the discharge of Stewart's Creek High School, its volunteers and event sponsors from any and all liability, claims, demands, and causes of action for personal injury, property damage, and/or other loss suffered by my child in connection with his/her participation in the tournament. In my absence and in the event of injury to my child, I request medical attention be given my child by a duly licensed doctor, dentist or other medical professional.

I represent that I am the parent/guardian of the minor named above and I agree that the grant and release contained therein binds the minor and me to all of its terms.

Parent/Guardian Signature Date	