**WAIVER AND RELEASE OF LIABILITY**

I understand participation in youth soccer carries risks, including physical and health risks. These risks include potential physical injury, but also include risk to infectious diseases, including novel coronaviruses like COVID-19. The Commonwealth of Pennsylvania, the Eastern Pennsylvania Youth Soccer Association (EPYSA), the Central Pennsylvania Youth Soccer League (CPYSL), and Fusion FC have protocols to phase-in playing soccer again and to further protect players from infectious disease, but I understand these protocols do not eliminate all risk.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print name) am responsible as parent or guardian for\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print player’s name) and authorize their return to play soccer. I understand participation in soccer is voluntary and I accept any associated risks involved. I hereby release Fusion FC Soccer, its Board of Directors, staff, and volunteers from any liability or claims regarding physical injury or infectious disease that may occur during participation in youth soccer with the club.

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Signature of Parent/Guardian Date