



Player Release Form Playing up Two Divisions or More:

As the parent/legal guardian of _____ as the registrant, I recognize that there are inherent risks in playing in the _____ age division. I accept these risks for my child and recognize the possibility of physical injury associated with soccer. I hereby release, discharge and/or indemnify the Pennsylvania West Soccer Association (PAWSA) and it's affiliated organizations and sponsors, their employees and associated personnel, including the owners of the fields, and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the program.

Signature _____
Parent / Guardian

Date _____

Name (Printed) _____