



Lanier Soccer Association
PO Box 962, Gainesville, GA 30503
2500 Allen Creek Road, Gainesville, GA 30507

LIABILITY WAIVER

I, _____ (Parent/Guardian's name) hereby give permission for my child, _____ (child's name) to participate.

By registering, I hereby give approval for the participation of my child in any and all State Soccer Association / Lanier Soccer Association activities and I assume all risk and hazards incident to such participation, including transportation to and from said activities.

I waive, release, absolve, indemnify, and agree to hold harmless the Georgia State Soccer Association and Lanier Soccer Association, the organizers, supervisors, officers, directors, participants and persons or parents supervising or transporting participants to or from such activities from any claims arising out of injury to my child.

Dated: _____

Parent / Guardian Signature: _____