

Michigan Stars FC Sports Medicine Department Assumption of Risk



Warning, Agreement to Obey Instruction, Release assumption of Risk, and Agreement to hold Harmless.

I recognize that participating in professional athletics even as a tryout, trial player, or recruit can be dangerous activity involving **MANY RISKS OF INJURY**. I also understand that these dangers and risks can occur while participating in practice, competition, conditioning, strength training, as well as rehabilitation sessions.

I acknowledge that my participation in athletics is voluntary and carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risk varies from one activity to another, but the risks range from: 1) minor injuries such as scratches, bruises, and sprains to 2) major injuries such as eye injury or loss of sight, joint or back injuries, ligament/tendon injuries, broken bones; heart attacks and concussions to 3) catastrophic injuries including paralysis and death.

I voluntarily agree to assume all risks involved in participating in the level I have indicated below at Michigan Stars FC, including risks that may be associated with any travel in connection with my participation. Due to the dangers of participating in sports, I have recognized the importance of following the coach's instructions regarding playing techniques, training, rules of the sport, and other team rules and obey such instructions.

In consideration of Michigan Stars FC permitting me to participate for athlete events, including but not limited to: trying out, practicing, or competition, I hereby assume all risks associated with participating. I agree to hold Michigan Stars FC, its employees, agents, representatives, coaches, and volunteers harmless from all liability, actions causing of action, debts, claims, or demands of any kind of nature whatsoever which may arise by or in connection with my participation in activities related to Michigan Stars FC. The terms hereof shall serve as a release and assumption of risk of my heirs, estate, executor, administrator, assignees, and for all members of my family.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in Michigan Stars FC athletics. I hereby assert my participation is voluntary and that I knowingly assume such risks.

Level:		
Athlete's Name:	Date:	
Athlete's Signature:		
Parent/Guardian's Name:	Date:	
Parent/Guardian's signature:		
(If athlete is under 18 years of age)		