



# MN Thunder Academy Liability Waiver/Statement of Understanding

Please return to the team manager (Do Not mail  
into the club)

The following conditions are understood and accepted by the undersigned parents on behalf of their son or daughter, who is participating in the MN Thunder Academy program.

There is a risk of injury in youth soccer practices and games.

MN Thunder Academy coaches and managers are only able to perform basic first aid for cuts, bruises, etc.

Immediate medical attention may not be available, if required.

Parents are responsible and will notify coaches in writing of any relevant medical condition preexisting or developing during the season for their son or daughter.

Parents are responsible for obtaining treatment of any medical condition or injury of a player by a physician, if necessary, and that any restrictions placed on the player by a physician are strictly adhered to.

In the absence of a parent, MN Thunder Academy coaches or trainers are authorized to arrange for professional medical attention for a player as judged to be necessary. Charges for the medical treatment provided to the player will be the responsibility of the parent(s).

MN Thunder Academy and its coaches reserve the right to limit the participation of an injured player unless the parent waives in writing the risk of additional injury or a physician certifies that the player can participate in practices and games.

The owners of the facilities within which the soccer activity is occurring and the MN Thunder Academy are released from any liability for any injuries or losses occurring in connection with any of the practice sessions and/or the use of those facilities.

MN Thunder Academy is released from any liability to the use of and participation in team website links on the internet.

Each MN Thunder Academy team manager may be allowed to distribute address, phone numbers and parent names of the players on that team to the other player's parents.

Player's Name (Print): \_\_\_\_\_

Player's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_