

# Jeremy Beardsley Soccer Academy

*www.BeardsleySoccer.com*

**2011-2012**

## *Winter Technical School*

### **Parental Consent Form**

The following form is used to provide information to aid in any event of a medical emergency. Please fill out the form neatly and fully. **PLEASE PRINT.**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Guardian's Name/Relationship

\_\_\_\_\_  
Allergies

\_\_\_\_\_  
Present Medications

\_\_\_\_\_  
Relevant or Recent Illnesses or Injuries

#### **EMERGENCY CONTACTS**

\_\_\_\_\_  
Father's Name

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Work Phone

\_\_\_\_\_  
Mother's Name

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Work Phone

\_\_\_\_\_  
Other Contact/Relationship

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Work Phone

\_\_\_\_\_  
Insurance Company

\_\_\_\_\_  
Group#

\_\_\_\_\_  
Policy#

\_\_\_\_\_  
Phone

#### **MEDICAL RELEASE**

My child is in good health and has my permission to participate in player training. He/she has no previous illness or bodily injury which will keep him/her from participating in the sport of soccer.

Participation in any sport may cause physical injury including sprains, strains, contusions, fractures, dislocations, ruptures, herniations, lacerations, concussions and even death. I authorize the nurses, doctors, trainers and emergency personnel to administer First Aid or care as deemed necessary.

I/We, the undersigned, for ourselves, our heirs, executors and administrators, waive, release and forever discharge Jeremy Beardsley and the Jeremy Beardsley Soccer Academy, L.L.C., its staff, officers, agents, representatives, employees, successors, and assigns to and from any and all rights and claims for damages to person and property activities, or while partaking in training at any site.

\_\_\_\_\_  
Guardian's Signature Date

\_\_\_\_\_  
Parent or