

# Methacton United Soccer Club (MUSC) Medical Release

Name \_\_\_\_\_ Birth date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

In case of emergency, please contact: \_\_\_\_\_ Phone \_\_\_\_\_

Physician Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Hospital Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

**In the event my/our physician is unavailable, or we do not have a physician, I hereby authorize the medical personnel at one of the local hospitals to treat my child for any illness or injury occurring during the Methacton United Soccer Club (MUSC) program. I understand that this will be at no expense to the Methacton United Soccer Club (MUSC) and I will assume all costs including transportation.**

Medical Insurance Provider and I.D. Number \_\_\_\_\_

Does your child have any allergies? Yes, please explain: \_\_\_\_\_

Is your child taking any medication? Yes, please explain: \_\_\_\_\_

Has your child had injuries to bones, joints, muscles, or nerves? Yes, please explain: \_\_\_\_\_

In case of above injuries, has your child been cleared by a physician to play soccer? \_\_\_\_\_

**As a condition to the participation in the Methacton United Soccer Club (MUSC), we, the parents of the above named child, hereby give our approval to his/her participation in any and all of the activities. We assume all risks and hazards incidental to the conduct of the activities and transportation to and from the activities. We do hereby release, absolve, indemnify, and hold harmless Methacton United Soccer Club, its Organizers, Sponsors, and Coaches, any or all of them, in case of injury to our child. Furthermore, we hereby agree to refrain from bringing suit against any of the above named on our behalf or on the behalf of our child named above on account of any damages or injuries to any person or thing to occur in connection with this activity.**

\_\_\_\_\_  
Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_