

Three Lions Soccer Academy Inc. 4 Foxmore Court Marlton, New Jersey 08053 Cell (609) 670-2180 threelionssoccer@comcast.net

The Three Lions Soccer Academy Application And Waiver Form

No application can be accepted without the waiver form, being completed in full and signed by a Parent or Guardian. This waiver form will be in force for duration of one year from the date of signing.

Name of Player (Print):				
Address:				
D.O.B City:		State:	Zip:	
Home Phone: ()	Work Phone: ()		
Email:	Male/Female Age			
Location of Program:	Date:			
Health Problems:				
Name of Parent or Guardian (PRINT)				
Signature or Parent or Guardian:				
Date of Signature:				

I certify that the above child is in excellent health and may participate in strenuous activities including soccer. I agree to hold the Three Lions Soccer Academy, its servants, agents and/or employees harmless from any and all claims from injuries during participation in the above program. Permission is hereby granted to the Three Lions Soccer Academy, its servants, agents/ or employees for my child to receive emergency treatment, if needed, and there are no limits to my child's participation except as stated in writing this application. I agree to adhere to all of the Three Lions Soccer Academy requirements.