

**PERMISSION TO PLAY SHOULD BE PRESENTED TO  
THE REFEREE BEFORE YOUR FIRST GAME**

**PARENT/GUARDIAN PERMISSION**

Player's Name: \_\_\_\_\_  
has my permission to participate in the Iowa City Kickers  
Soccer program. I waive and release all members of the  
Board and anyone involved in the program from any claim or  
liability in the event of injury. He/she is in good physical  
condition and is capable of undertaking a strenuous  
recreational program.

\_\_\_\_\_  
Signature (parent or guardian)  
**Signature is required**

\_\_\_\_\_  
Date

