

Waiver of Liability for Soccer + Halaqa

This agreement releases MAC Islamic Centre and Mac Youth from all liability relating to injuries that may occur during the Soccer and Halaqa event. By signing this agreement, I agree to hold MAC Islamic Centre and Mac Youth entirely free from any liability, including financial responsibility for injuries incurred, regardless of whether injuries are caused by negligence.

Participant Information

Child's Name: _____

Health Declaration

I, the undersigned, confirm that my child does not have any conditions that will increase his/her likelihood of experiencing injuries while engaging in the physical activities offered.

Covid-19 Policy

I agree that if my child displays symptoms of Covid-19 (cough, fever, runny nose, etc.), I will not bring my child to the event and will inform the staff of their absence promptly.

Schedule and Supervision

- The event starts promptly at 7:30 pm and concludes after Maghrib prayer.
- Please note that there will be no supervision provided before 7:30 pm.

Behavior and Participation Policy

- The management reserves the right to remove any participants due to bad behavior
- The management reserves the right to remove any participants who display mental challenges that impede their ability to participate.

Drinking Water Policy

- All registered children **must** bring a water bottle from home.

Photo/Video Release

I give permission for photos/videos of my child to be taken during the event and used for promotional purposes by the MAC Islamic Centre and Mac Youth.

Acknowledgment of Safety Precautions

By signing below, I acknowledge that my child and I will make every effort to obey safety precautions as listed in writing and as explained to my child verbally. We will ask for clarification when needed.

Parent/Guardian Signature: _____

Parent/Guardian Name (Printed):

Date: _____

Emergency Contact Information:

• **Name:** _____

• **Phone Number:** _____

• **Relationship to Child:** _____

Authorization for Emergency Medical Treatment

In the event of an emergency, I authorize MAC Islamic Centre and Mac Youth to arrange for emergency medical treatment (calling 911) for my child and will be responsible for any costs incurred.

Parent/Guardian Signature:

Date: _____