

**OAK LAWN GIRLS' SOCCER SUMMER LEAGUE  
HOLD – HARMLESS FORM**

**Each player participating must turn this form in prior to playing.**

I/we hereby give my permission for participation of my daughter in the soccer summer league at OLCHS. I/we understand that OLCHS will exercise care and caution but are not held responsible for any injury that could occur.

**School:** \_\_\_\_\_

Student-Athlete Name (Print): \_\_\_\_\_

Student-Athlete Signature: \_\_\_\_\_

Student-Athlete Cell Phone Number: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date \_\_\_\_\_

**Emergency contact Information**

Parent/Guardian Name (Print) \_\_\_\_\_ Cell# \_\_\_\_\_

Parent/Guardian Name (Print) \_\_\_\_\_ Cell# \_\_\_\_\_