

SOUTHAMPTON AWAY TRAVEL

PARENTAL/GUARDIAN Consent Form and Liability Waiver

Participant's Name: _____ Date of Birth: _____
Parent/Guardian's Name: _____
Home Address: _____
Home Phone Number: _____ Mobile Number: _____
E-mail: _____

I, (Parent/Guardian) _____, grant permission for my child
(Child's Name) _____, to travel with Southampton Away Travel for
the entire football season of 2017/2018.

As a parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named
minor traveller.

I agree on behalf of myself, my child named herein, to hold harmless and defend **Southampton Away Travel**, its
owners or representatives associated with the event, from any and all actions, claims, demands, damages, costs,
expenses and all consequential damage arising from or in connection with my child travelling in the event or in
connection with any illness or injury or cost of medical treatment in connection therein, and I agree to compensate
Southampton Away Travel, its owners or representative associated with the event for reasonable attorney's fees
and expenses arising therewith.

Signature: _____ Date: _____