



**Milan Academy Australia Pty Limited**  
**Suite 606**  
**Level 6**  
**5, Hunter Street,**  
**Sydney NSW 2000**  
*(ABN : 21 132 261 002)*

## **Risk Waiver**

I \_\_\_\_\_ ( name of parent/  
guardian)

Mother/Father / Guardian/ Carer of \_\_\_\_\_ ( player's name)

understand that there are inherent risks in participating in the soccer activity programme with MAA . I accept that all reasonable care will be taken to prevent any injury and indemnify and release MAA and its employees of any liability from injuries incurred during training, matches or tournaments.

I also confirm that the medical information I have provided is correct.

In good faith

\_\_\_\_\_( parent/ guardian's signature)

\_\_\_\_\_(Date)