



Oshkosh Youth Soccer Club, Inc.  
P.O. Box 2621  
Oshkosh, WI 54903

<https://oysc.org>  
[info@oysc.org](mailto:info@oysc.org)

## New Ear-Piercing Studs Waiver

I hereby authorize that my child be allowed to play soccer with their new ear-piercing studs in their earlobe. I acknowledge the danger and agree to covering the new ear-piercing studs with appropriate material. **I recognize that it is OYSC policy to not allow any jewelry on players during competition, but I have a signed consultation from my ear-piercing professional along with this Waiver.**

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*Name of child*

### Release of All Claims and Indemnification Agreement

The undersigned parent or guardian desires the child named above to participate in the physical activities sponsored by Oshkosh Youth Soccer Club, Inc. The undersigned acknowledges that there are certain dangers and risks of injury inherent in these soccer club activities, but nevertheless consent to the participation in such activities of the child. It is expressly understood by the undersigned parent or guardian that the child would not be permitted by Oshkosh Youth Soccer Club, Inc., to engage in soccer activities sponsored by Oshkosh Youth Soccer Club, Inc., without this release.

Therefore, the undersigned parent or guardian for themselves and their named child, for and in consideration of the opportunity to participate in the soccer activities sponsored by Oshkosh Youth Soccer Club, Inc., and for other good and valuable consideration, do hereby forever release, acquit, discharge and hold harmless the City of Oshkosh, the County of Winnebago, municipal corporations, the Fox Valley Technical College, the Oshkosh Area School District, and the Oshkosh Youth Soccer Club, Inc., affiliated organizations and the officers, directors, coaches, officials, agents, and employees of each of them for any and all claims, actions, causes of action, demands, rights, damages, costs, loss of service, expenses, and compensation whatsoever which the undersigned may hereinafter incur on account of, or in any way growing out of any and all known or unknown, foreseen or unforeseen, bodily and personal injuries and/or property damage or the consequences thereof resulting from any accident, casualty or event involving the undersigned and arising out of soccer activities, including but not limited to, transportation for treatment, treatment, travel, sponsored or furnished by Oshkosh Youth Soccer Club, Inc.

The undersigned parent or guardian has read the foregoing liability waiver and indemnification agreement, fully understands and accepts for themselves and the child each and every provision thereof and agrees to be bound forever by its provisions.

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*Signature of parent, guardian or player (if over 18 years old)*

*Date*

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*Printed name of the above*

*Relationship to player*



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## New Ear-Piercing Studs Consultation

I hereby authorize in my professional experience the following recommendation:

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*Name of child*

- [ ] The above athlete **may play** Oshkosh Youth Soccer Club games during the initial ear-piercing timeframe knowing that the parent is requesting the earrings to stay in the ear lobe.
- [ ] The above athlete **should not play** Oshkosh Youth Soccer Club games during the initial ear-piercing timeframe knowing that the parent is requesting the earrings to stay in the ear lobe.

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*Signature of ear-piercing professional*

*Date*

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*Signature of parent, guardian or player (if over 18 years old)*

*Date*