



**Virginian Elite Soccer Tournament
May 28-30, 2022**

Medical Release Confirmation I, the team manager or team contact of,
_____ (team), hereby acknowledge I have a medical
release form for each player on my roster that is filled out and completed to be used in case of an
emergency. I recognize that these medical forms give permission for any coach, team manager,
or other team official or parent of my child's soccer team, to obtain whatever
medical attention may be necessary in case of injury or illness.

Signature of Team Manager/Team Contact: _____

Print Name of Team Manager: _____

Date: _____