



Team Event Form

Mandatory for All Team Entries

Once this form is complete. Drop the form into the DropBox on the tournament website.

TEAM NAME		AGE GROUP	
CONTACT NAME			
CONTACT PHONE			
CONTACT EMAIL			

TEAM ROSTER	
PLAYER NAME	PLAYER BIRTHDAY

Waiver and Agreement

As the team's primary contact, I agree that all player who are on this roster are properly registered with USYS or US Club Soccer and birthdays on this form are accurate. Further, I attest that each player given parent or guardian consent to participate in the GOOD FRIDAY 5v5 EVENT at Farm League Park in Klein, Texas. All players and their parents/guardians understand the risks, both known and unknown, that are associated with competing in this event, including but not limited to illness, injury, permanent paralysis and death. Each player and their parent/guardian is choosing to freely participate and knowingly assumes all such risks. Parents and Guardians agree to remove themselves from the competition if at any point they observe any significant hazard that may affect their participation. All parties choosing to participate agree to release and hold harmless Legacy Soccer, Farm League Park, all members, employees, owners, and volunteers with respect to injuries, illness, disability or death, and any and all loses related to such.

MANAGER SIGNATURE _____

DATE _____