** JC STADUIM FOOTBALL TOURNAMENT/LEAGUE**

**PLAYER REGISTRATION FORM**

[**www.jcstadium.com**](http://www.jcstadium.com)

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| **Tournament:(Circle) JAN, FEB, MARCH, APRIL, MAY, JUNE, JULY, AUG, SEPT, OCT, NOV, DEC****League: (Circle) JAN-FEB, MARCH-APRIL, MAY-JUNE, JULY-AUG, SEPT-OCT, NOV-DEC****Age Group:(Circle) U10, U11, U12, U13, U14, U15, U16, U17, U18****Skill Level:(Circle) Academy Team, Pre-Academy Team, Division 1 Team, Division 2 team** |

**TEAM NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent Information**

****Parent Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Town\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_ Local Government Area\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Player Information**

Player Information\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_

Gender (M) (F) Player Height\_\_\_\_\_\_ Player Weight\_\_\_\_\_\_\_\_ Cell Phone\_\_\_\_\_\_\_\_\_\_

 League or Tournament\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Club Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position\_\_\_\_\_\_\_\_\_

Emergency Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Consent and Liability Waiver- Release of all Claims (must be signed to participate)**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_parent/guardian), am the parent of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (minor or child) as lawful consideration for my minor child being permitted to participate in the JC Stadium football league or Tournament. I agree that neither my minor child nor I will make a claim against, sue or prosecute JC Stadium and their agents, sponsors, suppliers and employees for damages for death, personal injury or property damage which my minor child may sustain as a result of my child’s participating in these sporting activities. I FURTHER UNDERSTAND THAT SPORTS INVOLVE PHYSICAL CONTACT BETWEEN PLAYERS, THAT SERIOUS ACCIDENTS OCCASIONALLY OCCUR DURING SUCH SPORTING ACTIVITIES, AND THAT PARTICIPANTS IN SUCH SPORTING ACTIVITIES OCCASIONALLY SUSTAIN SERIOUS PERSONAL INJURIES (INCLUDING DEATH) AND/OR PROPERTY DAMAGE, AS A CONSEQUENCE THEREOF. KNOWING THE RISKS OF PARTICIPATION, NEVERTHELESS, I HEREBY AGREE THAT MY MINOR CHILD AND I ASSUME THOSE RISKS AND RELEASE AND HOLD HARMLESS THE OWNER OF JC STADIUM AND THEIR AGENTS, SPONSORS AND EMPLOYEES WHO (THROUGH NEGLIGENCE OR CARELESSNESS) MIGHT OTHERWISE BE LIABLE TO ME, MY MINOR CHILD (OR OUR HEIRS OR ASSIGNS) FOR DAMAGES.

I attest that I am eighteen (18) years old or older and that I’m in physically fit and have no known medical conditions, which prohibit me from participation in this sport. I agree to follow all laws, rules and guidelines regulating the conduct of the league and tournament. **I authorize JC Stadium to use my photograph, picture or likeness, and voice to appear in any documentary, promotion (including advertising), television, video, or radio** [**coverage**](http://coachingamericansoccer.com/administration/liability-form/) **of the league or tournament, without compensation. I authorize that an unaltered copy of this form may be generated and given to the officers or directors of other leagues or tournaments in order to allow my participation in their football programs, if the form is required and I have requested to participate.**

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY FOR MYSELF AND MY CHILD AND A CONTRACT BETWEEN MYSELF, MY CHILD AND JC STADIUM AND THEIR AGENTS, SPONSORS AND EMPLOYEES, AND I HAVE SIGNED IT OF MY OWN FREE WILL

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Over 18 years Old: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_