

MADISON FC BOYS HS 8v8 TOURNAMENT (7/31 & 8/1/2010)

HIGH SCHOOL _____ **VAR** ___ **JV/FR** ___

CONTACT _____ **CELL** _____

PLAYER NAME _____ **PARENT SIGNATURE*** _____

1. _____ X _____

2. _____ X _____

3. _____ X _____

4. _____ X _____

5. _____ X _____

6. _____ X _____

7. _____ X _____

8. _____ X _____

9. _____ X _____

10. _____ X _____

11. _____ X _____

12. _____ X _____

13. _____ X _____

14. _____ X _____

***** **WAIVER OF LIABILITY:** By signing this waiver, I, the parent/guardian of the individual named above, do hereby agree to indemnify and hold harmless Madison FC, Inc. and its employees, officers and agents from and against all liability resulting from participation in the soccer camp activities. I understand that competitive soccer, like all activity and sports programs, has some inherent risk, for which I agree to assume liability. Furthermore, the individual named herein is in good physical health, appropriate for the activities in which he or she will be participating. I understand that Madison FC, Inc. does not provide accident insurance. In the event of a medical emergency and I cannot be reached, I authorize Madison FC, Inc. to obtain medical treatment for my son, daughter or legal ward.

(BRING ROSTER TO 1ST GAME – SCHEDULE WILL BE EMAILED BY 7/23/10)