



EVANSVILLE PARKS AND RECREATION SOCCER REGISTRATION FORM



TEAM NAME: _____

LAST YEAR: _____

MANAGER: _____

ADDT=L CONTACT: _____

ADDRESS: _____

ADDRESS: _____

_____ ZIP

_____ ZIP

HOME PHONE: _____

HOME PHONE: _____

CELL PHONE: _____

CELL PHONE: _____

WORK PHONE: _____

WORK PHONE: _____

E-MAIL: _____

E-MAIL: _____

FAX: _____

FAX: _____

BASE ENTRY FEE: \$ _____

LATE FEE: ** \$ _____

TOTAL AMOUNT DUE \$ _____

(A \$15.00 late fee will be charged if turned in after registration deadline)

DPR USE: Receipt # _____ Paid \$ _____

DPR USE: Receipt # _____ Paid \$ _____

LEAGUE

CLASSIFICATION

LEVEL OF PLAY

TEAM COLOR

Spring (6) _____

Open _____

Competitive _____

Summer (6) _____

Industrial _____

Intermediate _____

Fall (8) _____

Church _____

Recreational _____

NIGHT OF PREFERENCE Soccer leagues are primarily played on Sunday afternoons, or evenings. Please list any other night during the week (Monday – Friday) that your team can play.

Comments: Please use this space to comment on your team=s skill and competition level. List any information that would help us to insure proper league placement. Also, please use this space to make us aware of any scheduling conflicts with other leagues and teams.

MANAGER ACKNOWLEDGMENT

As team manager, I hereby acknowledge and understand, the DPR Sports Staff will make every effort to accommodate teams night of preference, league competition levels, and special requests, but the DPR Sports Staff reserves the right to make changes in scheduling to accommodate as many teams as possible equally. Furthermore, I acknowledge and understand that teams withdrawing after league placement are subject to a 20% administration fee, and a pro-rated league charge. Once a team has completed 50% of their league schedule, no refund will be issued. I also acknowledge responsibility for team entry fees, including any collection and attorneys fees associated with this team.

Manager Signature: _____

SOCCKER PLAYER WAIVER, RELEASE OF LIABILITY, INDEMNIFICATION, AND ROSTER FORM

I. The undersigned being at least eighteen (18) years of age (or being under the age of 18 but with the consent of a parent or guardian as acknowledged below) acknowledge, agree and understand that:

- 1.) Voluntarily and of my own free will, I elect to participate as a member of the soccer team and league indicated below.
 - 2.) I understand that there are certain risks and hazards involved in participating in soccer that may result in injury or death to me or other players, including, but not limited to those hazards associated with weather conditions, playing conditions, field design, field maintenance, field condition, equipment or other participants.
 - 3.) I understand that soccer is dangerous to me and to other players and may result in serious injury or death.
 - 4.) I understand that the very nature of the game of soccer is hazardous and risky, including, but not limited to, the acts of kicking, throwing, running, falling, tripping, slipping, fielding and catching of the ball, running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players.
- Furthermore, I the undersigned player, agree that in consideration for the right to play as a member of the team designated below and in consideration for permission to play on the fields arranged for by the team, league, City of Evansville or the Department of Parks and Recreation, I agree as follows:

- 1.) I acknowledge that I have a duty to inspect the conditions of the field and areas surrounding prior to each match and throughout the match. If I begin any part of the match thereof, I waive any claim for any injury arising from a defective condition of the field or surrounding area.
 - 2.) I voluntarily elect to accept and assume all risks of injury incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member during practice or play by other teams or by other players on my team, (c) while on or upon the premises of any and all of the fields arranged for by my team or league, the City of Evansville, or the Department of Parks and Recreation for practice or play, and (d) for all risks of injury associated with any latent or patent defects of the field or the improvements surrounding the field.
 - 3.) I release, discharge, and agree not to sue the team and league designated below, the City of Evansville, the Department of Parks and Recreation, the field owner or other entity designated below, any officers, agents, servants, associations, employees, or any person or entity connected with the team, or league field, for any claim, damages, costs or cause including but not limited to the negligence, omission, breach of contract or wrongful conduct of the City of Evansville, Department of Parks and Recreation and these parties are hereby released from liability.
- Photo release: I grant to Evansville Parks & Recreation, its representatives and employees the right to take photographs of me and to copyright, use and publish the same in print and/or electronically. I agree that Evansville Parks & Recreation may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I ACKNOWLEDGE THAT I HAVE READ AND THAT I UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM.

TEAM NAME: _____

	PLAYER	PLAYER'S SIGNATURE (Parent or Guardian if under the age of 18)	ADDRESS	CITY, STATE & ZIP	HOME PHONE	COUNTY
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						