

Ottawa-Glandorf Soctoberfest Tournament Roster & Waiver

Please Circle Appropriate Categories

TEAM NAME _____ Coach _____
 TEAM CONTACT _____

U-8 Co-ed U10 U12 U15 Boys Girls

Any team in U10, U12, or U15 with 1
 boy must play in the boys division

	Players		Legal Guardian		Player's Birthdate	PARENT'S SIGNATURE
	First Name	Last Name	First Name	Last Name		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						

Waiver Form

REPRESENTATIONS, ACKNOWLEDGEMENTS, AND AGREEMENTS:

1. I hereby represent and certify that the age of the registrant listed is correct and acknowledge and agree that the registrant is physically fit to engage in both structured and unstructured activities at the Ottawa-Glandorf Soctoberfest Tournament.
2. My signature below indicates that I release the Ottawa-Glandorf Soccer Association, and all parties associated with organizing and operating the Soctoberfest Tournament, from all liabilities that may arise as a result of my child participating in the tournament. I acknowledge that there are many inherent risks in playing soccer. That among the risks is serious injury and even death. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releases or others, and assume full responsibility for my child's participation.
3. I hereby represent and certify that the registrant has adequate health insurance to cover any and all injuries occurring as a result of participation in soccer activities at the Soctoberfest Tournament and as participant, I hereby consent to any and all emergency medical care for participant and agree to pay for same.

I certify that the above information is correct

Coach or Team Contact _____

Date _____

Rosters must be turned in before your first scheduled game or your team will forfeit all tournament games without refund.