

# Adult Roster/Waiver

Team \_\_\_\_\_

Manager \_\_\_\_\_

Chaska 3 v 3 Tournament

**TEAM ROSTER MUST BE FILLED OUT COMPLETELY AND SUBMITTED PRIOR TO THE START OF EACH SEASON**

WAIVER/EXCLUSION CLAUSE (please read carefully and acknowledge by signing)

By registering through CC United Soccer Club, I understand that in attending the soccer program and using the facilities I do so at my own risk. CC United Soccer Club, and its owners, employees and agents, shall not be liable for any damages whatsoever arising from any personal injury or property loss sustained by participant and my family in or about any programs on the premises. I acknowledge that I am aware of the risks inherent in participating in soccer (both practice and competition); that soccer is a physical sport which can require considerable running, starting, stopping and physical exertion; and could potentially lead to limb injuries; possible permanent disability and death. Participants assume full responsibility for all injuries and damages which may occur in or about any programs on the premises and I do hereby fully and forever release, discharge and hold harmless CC United Soccer Club, all associated facilities and its owners, employees and agents from any and all claims, demands, damages, rights of action, present or future resulting from or arising out of any person's participation in any programs or use of its facilities.

In addition, I agree to follow the rules of play and conduct set by CC United Soccer Club. I understand that failure to do so may result in suspension from participation. Also, I waive all rights to any photos taken for use in any CC United Soccer Club publication.

**List of rostered players with signature acknowledging Waiver/Exclusion Clause**

#	Name	Street Address	City	ST	Zip	Birthdate	Phone	Email	Signature
1									
2									
3									
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18									

My signature above verifies I have read the waiver and understand all rules and waivers.

**This form must be filled out and submitted 2 ways:**

**1) An electronic version emailed to [info@ccunitedsoccer.com](mailto:info@ccunitedsoccer.com)**

a. Please save and send file with the following name: roster-GU16-Johnson.xls. Where GU16 is gender and age group and Johnson is the coaches (or manager's) last name.

b. If adding a player, please included UPDATED in the file name (ex: roster-GU16-Johnson-UPDATED.xls)

**2) Submit at Tournament check-in prior to game/activity.**

Please do not worry about font size, etc. The cells are set to resize the font to fit in the box.