

San Diego Soccer Festival

(Sponsored by SDCSL)

Robb Field, Ocean Beach July 11 & 12, 2015

Team Roster & Participants Release Form

Team Name: _____

Division: (circle one)

Men's: Open A B1 B2 Over 30 Over 40 Over 48

Women's Open A B Over 30

Coed: Open Over 30

Team Manager: _____

Participant Name _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Birthdate: _____ **Phone #** _____

(Managers please make sure all players sign)

Shinguards are required!

I acknowledge that I am aware of and assume the risks in participating in an athletic event of this type. I attest that I am in good health and have trained sufficiently for this event. I will assume my own medical and emergency expenses in the event of an accident or injury resulting from my attending this event.

I realize if I do not follow the rules of this event I may be removed from the competition and the event site. I agree to participate with proper sportsmanship and safety while attending this event.

I, the undersigned, hereby assume full responsibility for myself, my heirs, executors, administrators, for risk of injury, death or property damage due to the result of my participation in this event.

Participant Name: _____ **Date:** _____

Participant Signature: _____

Participant Name: _____ **Date:** _____

Participant Signature: _____

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Participant Signature: _____

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All divisions have a maximum roster size of 15 players.