SOCCER TEAM ROSTER (Max 18)

Coach: _____
Address:_____
City, State, Zip:_____
Cell #:_____

Team Name:_____
Team Gender (Circle) Girls Boys Grade/Age_____
Division Affiliation (Circle) REC Select
Club Affiliation:_____

Participants Name	Phone	School	Parent/Guardian Signature	Address/City/State	Birthdate + Grade

KINGDOM SPORTS CENTER WAVIER FOR SPECTATORS AND PARTICIPANTS

ATTENENTION: No Player/Team will be able to participate if the Wavier is not signed and dated on the Registration Form. Roster <u>must</u> be turned in s first game.

By Signing This Roster, You are Agreeing To The Terms Below

<u>WAIVER/EXCLUSION CLAUSE (please read carefully and sign below)</u>

I, the parent/guardian/Coach/participant, spectator, in registering (or watching) for Any Sporting Event within The Kingdom Sports Center, Inc., understand that he/she/I in attending any programs and using the facilities does so at his/her/my own risk. Kingdom Sports Center, Inc., and its/their owners, Sponsors, employees and agents, shall not be liable for any damages whatsoever arising from any personal injury or property loss sustained by participant and his/her/my family in or about any programs on the premises or at the 440 Watkins Glen Location. I acknowledge that I am aware of the risks inherent in participating (and or watching) in Sports such as Basketball, Soccer, Training, or any other purpose, that is a Sports Facility which host events that can require considerable running, starting, stopping and physical exertion; and could potentially lead to limb injuries; possible permanent disability and death. Participants and parents assume full responsibility for all injuries and damages which may occur in or about any programs on the premises and he/she/I do or does hereby fully and forever release, discharge and hold harmless Kingdom Sports Center, Inc., Kingdom Community Foundation and all associated facilities and its/their 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/locations. In addition, he/she/I agree(s) to the following rules of play and conduct set by Kingdom Sports Center, Inc and located on website and throughout the facility. He/she/I understand(s) that failure to do so may result in suspension from participation. Also, I waiver all rights to any photos or live video taken during practice or competitions for use in any Kingdom Sports Center, Inc. publication. All Spectators take their own responsibility regarding the COVID-19 online information stating they are aware of the risks they take if being exposed while within the facility.

Parent/Guardian/Coach Signature: _____**Date:** _____