



03152010

Kick It 3v3 Soccer Official Team Roster Form And Waiver / Release of Liability

Team Information:

| | | |
|---|--|---|
| Kick It ID Number (this is a new number in 2010) | Team Name | Age Division |
| Team Contact Person Name | Email Address for Team Contact Person | Phone (Home) for Team Contact Person |
| Phone (Daytime) for Team Contact Person | On-Site Phone Team Contact Person | Alternate Team Contact Person & Cell Phone |

PLEASE READ BEFORE SIGNING!

In consideration of being allowed to participate in any way in the **KICK IT 3V3 SOCCER** TOURNAMENT, related events and activities (collectively, the "Event"), the undersigned, for himself/herself, his/her personal representatives, heirs, and next of kin:

1. Acknowledges, appreciates, and agrees that the risk of injury from the activities involved in the Event is significant, including the potential for injury, permanent paralysis and death;
2. KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume all full responsibility for my participation; and,
3. Willingly agrees to comply with the stated and customary terms and conditions for participation. If however he/she observes any unusual significant hazard during his/her presence or participation, he/she will remove him/herself from participation and bring such to the attention of the nearest official immediately; and,
4. Hereby irrevocably grant to Blue Entertainment Sports Television ("BEST") and its respective affiliates, subsidiaries, parent entities, licensees, successors and assigns, and those acting with its permission or upon its authority (all of whom are referred to below as "licensed parties") the absolute, perpetual, and unrestricted right and permission to record, copy, reproduce, adapt, edit, summarize, copyright, photograph, film, license, vend, rent, distribute, televise, publish, exhibit, disseminate, perform and otherwise exploit in any and all markets and media (collectively "use") his/her appearance, name, likeness, voice, documents, participation in the Event, other property, views, performance, efforts, trademark or trade name, biography, artistry, recorded image and voice, as well as all other documents and artifacts provided to BEST by him/her (collectively the "materials"). This grant of rights is made without limitation upon time, circumstances, location, market or medium of use and without any right to inspect or approve the materials or the uses to which any of the materials may be put and without any payment due to him/her; and
5. Agrees that all audio and/or video recordings of the materials or any of them as well as all descriptions or summaries of his/her personal history and/or views that are made and used by any licensed party will be solely owned by BEST and that BEST may copyright its name and for its sole benefit any such audio or video recording of the Event containing the materials or any of them; and
6. Acknowledges, appreciates, and agrees that he/she has read this form and understand that by signing this form, he/she is giving up legal rights and remedies on behalf of him/herself and his/her family, estate, heirs, and/or assigns; and
7. HEREBY INDEMNIFIES, RELEASES AND HOLDS HARMLESS KICK IT 3V3 SOCCER, HOOP IT UP 3on3 BASKETBALL, LET IT FLY 4on4 FLAG FOOTBALL, BEST, its affiliates, subsidiaries and parent entities, and their officers, officials, agents and/ or employees, directors, shareholders, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE; and
8. HAS READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT HE/SHE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT and authorizes on his/her behalf any of the Releasees to obtain any medical care or treatment deemed necessary; and
9. Warrants and represents that he/she (i) is the owner of all rights granted hereunder or has been duly authorized by the owner of such rights to grant same and (ii) is at least eighteen (18) years of age or is the legal parent or guardian of the minor child listed below and is executing this WAIVER / RELEASE OF LIABILITY / REFUND POLICY / BAD WEATHER POLICY on behalf of such minor child. In the event that the Undersigned is a legal parent or guardian of a minor child who turns the age of 18 during the Event, the acknowledgement and agreement of such child is also required.

REFUND POLICY / BAD WEATHER POLICY
There will be no refunds granted for any reason before or after the registration deadline. This includes, but is not limited to 1) Your team's inability to participate due to player injury, personal schedule or game scheduling conflicts, team drama, or other reason; 2) inclement weather, etc. In case of inclement weather, the Event Director reserves the right to reduce the number of scheduled games and/or the time of games and/or postpone or delay game times and/or cancel the Event. Every effort will be made to complete games and the tournament. Entry fees are non-refundable after registration deadlines.

**Players may sign if over the age of 18.

| Player's Full Name (Please Print) | Date of Birth | Email Address | Cell Phone Number | Signature of Player/Parent/Guardian ** |
|--------------------------------------|----------------|---------------|-------------------|--|
| 1 | mm / dd / yyyy | | () | I have read and I understand |
| 2 | mm / dd / yyyy | | () | I have read and I understand |
| 3 | mm / dd / yyyy | | () | I have read and I understand |
| 4 | mm / dd / yyyy | | () | I have read and I understand |
| 5 | mm / dd / yyyy | | () | I have read and I understand |
| 6 | mm / dd / yyyy | | () | I have read and I understand |

TEAM CONTACT/COACH'S VERIFICATION: This is to certify that this roster does not include any assumed names and that each player conforms to eligibility rule governing **KICK IT 3v3 SOCCER**

| | | |
|--|-------------|-------------------|
| COACH / TEAM CONTACT PERSON SIGNATURE | DATE | PRINT NAME |
|--|-------------|-------------------|

OFFICE USE ONLY:

RECEIVED BY: _____ DATE: _____