



# Registration/Roster Form

**Contact:**  
 Edgar Alvarez  
 Tournament Manager  
 Beach Soccer Blast!  
[elvarez@americascores.org](mailto:elvarez@americascores.org)

**Tournament Details:**  
**June 4, 2017**  
 Ocean Beach, San Francisco  
**June 17 & 18, 2017**  
 Main Beach, Santa Cruz  
**June 25, 2017**  
 Ocean Beach, San Francisco

**Tournament Rules & Info Online:**  
[www.BeachSoccerBlast.org](http://www.BeachSoccerBlast.org)  
**Registration Deadlines:**  
 San Francisco #1 - May 26, 2017  
 Santa Cruz - June 9, 2017  
 San Francisco #2 - June 16, 2017

**PLAYERS CAN ONLY BE REGISTERED FOR ONE TEAM PER AGE GROUP**

## COACH AND TEAM MANAGER PLEDGE

**As Coach/Manager of the team, I agree to have a positive attitude, be responsible for the positive behavior of my players and team parents, and I will be respectful to all other teams and referees. If my team or parents have any conflicts or problems, I will contact a tournament organizer immediately to help resolve the situation.**

Team Name: \_\_\_\_\_  
 Coach Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Phone: \_\_\_\_\_

**Release from Liability and Assumption of all Risk**

The "America SCORES Beach Soccer Blast!" (hereinafter "Event") involves physical activity. I understand that I am responsible for assessing my ability to participate in this Event and that participation is voluntary. I have read the description of the Event provided to me. I have and will ask any questions that I may have so that I can decide about my suitability to participate in the activity.

I understand that I can discontinue my participation in the activity at any time before or after the start of the Event.

I hereby represent and affirm that I am in good health. I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of my participation in the Event. This release is intended to discharge in advance America SCORES Bay

Area, its respective partner organizations, personnel, and agents from and against any and all liability arising out of or connected in any way with my participation in the Event, even though that liability may arise out of active or passive negligence, carelessness or other conduct on the part of the persons or entities mentioned above.

I further understand that accidents or property damage occasionally occur as a result of physical activity. I give my permission, in the event that I am injured during my participation, to receive any first aid, transportation, or medical attention that may be required in the judgment of the providers. Knowing the risks of participation in the Event, I hereby agree to assume all such risks and to release and hold harmless from all claims and liabilities all of the persons or entities mentioned above who might otherwise be liable to me (or my heirs or assigns) for damages. I further agree to indemnify America SCORES Bay Area the City of San Francisco, the City of Santa Cruz, its partner organizations, personnel and agents for any personal injury, or damage to property,

they may suffer by reason my participation in the Event. It is further understood and agreed that this waiver, release, and assumption of risk is binding on my heirs and assigns.

I hereby agree to the use by America SCORES Bay Area and its partner organization of my name and likeness, and any embodiment thereof on any medium, including video, photographic, audio, print or otherwise, for promotional and other purposes without the payment of any fee to me.

Each provision of this waiver, release and assumption shall be interpreted in such manner as to be effective and valid, but if any provision should be invalid, such provision shall be ineffective only to the extent of such invalidity, without invalidating the remainder of this agreement.

By returning this form I acknowledge that I have read and understand this agreement and agree to its terms.

Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Parent/Guardian Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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