BRANDON PALADY MEMORIAL 4V4 TOURNAMENT OFFICIAL TEAM ROSTER & WAIVER/RELEASE LIABILITY FORM

PLEASE READ FULLY AND CAREFULLY BEFORE SIGINING

In consideration for the permission granted to us and our families to visit and/or participate in activities, sports leagues, practices, fitness training sessions, or any other reason for which our attendance may be required at THE BRANDON PALADY MEMORIAL 4V4 TOURNAMENT, the undersigned responsible adults or parent/guardians hereby irrevocably and unconditionally release and waive all claims of any nature now and hereafter existing whether known or unknown against CITY OF MID LOTHIAN, MIDLOTHIAN SOCCER ASSOCIATION AND MIDLOTHIAN INDEPENDENT SCHOOL DISTRICT and all of their respective employees, officers, partners, directors, shareholders or affiliates (collectively," Indemnities") resulting in whole or part from participation in activities, practices, viewing of games or casual visitation of the undersigned and/or their children in such activities at, in or around the HAWKINS SPRING SOCCER complex and/or MIDLOTHIAN COMMUNITY PARK, INCLUDING ANY AND ALL SUCH CLAIMS THAT ARISE IN WHO LE OR PART DUE TO NEGLIGENCE OF ANY OF THE INDEMNITIES.

BY OUR SIGNATURES BELOW WE STATE AND VERIFY THAT WE ARE OVER THE AGE OF EIGHTEEN (18), or the parents or guardians of the indicated minor: Have read and fully understand the foregoing wavier/release as a full release of liability.

TEAM NAME:	AGE/DIVISION:		
	Jers ey #:	Age:	Birthdate:
Player or Parent Signature:			Date:
Player 2:	Jersey#:	Age:	Birthdate:
Player or Parent Signature:			Date:
Player 3:	Jersey#:	Age:	Birthdate:
Player or Parent Signature:			Date:
Player 4:	Jersey#:	Age:	Birthdate:
Player or Parent Signature:			Date:
Player 5:	Jersey#:	Age:	Birthdate:
Player or Parent Signature:			Date:
Player 6:	Jersey#:	Age:	Birthdate:
Player or Parent Signature:			Date:
Player 7:	Jersey#:	Age:	Birthdate:
Player or Parent Signature:			Date:
Player 8:	Jersey#:	Age:	Birthdate:
Player or Parent Signature:			Date: