

Coaches or Team Representative:

Turn this page back in with your registration, signed and dated.

All Teams are required to have an adult supervise any children who are associated with a team playing at the facility. Teams are also required to insure that all children are inside the building during the games and will be seated with other team spectators. Any Team failing to insure that children related to their team are following facility rules and are supervised will result in that team forfeiting their game. San Angelo Indoor Soccer and their Staff are not responsible for supervising unattended children. If a San Angelo Indoor Soccer Staff Member is required to repeatedly (two or more times) attend or enforce facility rules due to unattended / supervised children, the responsible team will be contacted, the game will be stopped and the team will forfeit that game. It is the responsibility of the Coach or Team Representative to ensure all team members and their guests are aware of this rule and the enforcement action.

All fees paid are non-refundable.

San Angelo Indoor Soccer has the right to merge divisions and leagues.

You may be playing against older or younger athletes.

Most games at San Angelo Indoor Soccer are night games.

You or your athletes may be playing late games.

"I have read and understand these facility rules and will make sure that myself, each member of this team, and anyone affiliated with this team will abide by them."

Coach / Manager / Player / Representative (Signature)

Date

Coach / Manager / Player / Representative (Printed Name)

Team Name / Division

Individual Registration Form

San Angelo Indoor Soccer

6033 S. Loop 306, San Angelo, Texas 76905

325-651-6914

sanangeloindoorsoccer.com

Last Name: _____ **First Name:** _____ **MI:** _____

Address: _____

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

Phone Number: _____ **Date of Birth:** _____

Male or Female: _____ **E-mail Address:** _____

Mother's Name: _____

Employer: _____ **Work Phone:** _____

Father's Name: _____

Employer: _____ **Work Phone:** _____

Emergency Notification: _____

Phone Number: _____

Number of Seasons Played (Indoor): _____ **(Outdoor):** _____

Year of Last Season Played: _____

I, or parent/guardian of the registrant, agree that I and the registrant will abide by the rules of US Indoor Soccer Association and San Angelo Indoor Soccer, its affiliated organizations and sponsors. I have read and signed a release of liability waver provided by San Angelo Indoor Soccer.

Printed Name (Parent or Legal Guardian): _____

Signature X _____ **Date:** _____

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT ("AGREEMENT")

Please Read The Entire Agreement Fully:

IN CONSIDERATION of being permitted to participate in any way in ANY field activity, practices, games, viewing of games, or casual visitation (herein after collectively "Activity") I, for myself and my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of these Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND THAT: (a) ANY field **ACTIVITIES AND OTHER ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS")**; (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, including bystanders, the condition in which the Activity takes place, or **THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW**; (c) there may be **OTHER RISK AND SOCIAL AND ECONOMIC LOSSES** either not known to me or not readily foreseeable at this time; and I **FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES** incurred as a result of the participation of me or that of the minor named below in the Activity.

3. HEREBY IRREVOCABLY AND UNCONDITIONALLY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE SAN ANGELO INDOOR SOCCER OR CONCHO VALLEY SPORTS COMPLEX, their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owner and lessors of premises on which the Activity takes place, (each considered one of the **"RELEASEES" herein**) **RELEASING THEM FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS.**

4. INDEMNITY AGREEMENT: I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, **I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES** from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as the result of such claim. By signing below, I expressly acknowledge that I have read and fully understand the contents of the indemnity provisions stated in Paragraph No. 4 herein.

BY SIGNING BELOW, I HAVE READ THIS ENTIRE AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW, AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

CHOICE OF LAW; CHOICE OF FORUM: Should any dispute or disagreement arise as a result of any ACTIVITIES, this Agreement shall be governed by the Laws of the State of Texas. **ANY DISPUTE SHALL BE TRIED IN STATE COURT LOCATED IN TOM GREEN, COUNTY, TEXAS.**

Printed Name of Participant / Player : _____

Address: _____
(Street) (City) (State) (Zip)

Phone: _____ Date of Birth: _____

Player's Signature (Parent if under the age of 18): X _____

Date: _____

EMAIL ADDRESS: _____

Authorization to Reproduce Physical Likeness & Voice

Authorization To Reproduce Physical Likeness & Voice: I, (print name) _____, hereby grant to San Angelo Indoor Soccer or Concho Valley Sports Complex, and to any third party that they may authorize, the right to use my name and the right to photograph, film, tape and record me, and to use such pictures, other reproductions or modifications thereof in the advertising, exploiting or publicizing of San Angelo Indoor Soccer or Concho Valley Sports Complex in any media. I hereby further expressly agree that this authorization is intended to be as broad and inclusive as is permitted by the law of the State of Texas.

Signature: X _____

Parental Consent for Minor Child: I hereby authorize and consent to the above authorization on behalf of my (Son/Daughter)

Parent's Signature: X _____

THIS WAIVER WILL BE KEPT ON FILE AND WILL APPLY FOR EACH AND EVERY ATTENDANCE AND/OR PARTICIPATION OF THE ABOVE NAMED FROM THIS POINT FORWARD AND THERE IS NO EXPIRATION OF THIS WAIVER.

MINOR RELEASE AND INDEMNITY AGREEMENT

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF ANY FIELD ACTIVITIES/OTHER ACTIVITIES AND THE MINOR'S EXPERIENCE AND APABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY IRREVOCABLY AND UNCONDITIONALLY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATION, AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNITY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

Printed Name of Parent/Guardian: _____

Address: _____
(Street) (City) (State) (Zip)

Phone: _____ Date: _____

PARENT/GUARDIAN SIGNATURE (only if participant/attendee is under the age of 18): X _____

This document is written in English. I fully understand this entire document.
(Este documento se escribe en ingles. Entiendo completamente este documento entero.)

Signature (Parent's or Legal Guardian Signature): X _____

San Angelo Indoor Soccer

Team Registration Form

Team Name: _____ Date: _____

Coach: _____

Address: _____

City & Zip Code: _____

Phone: _____ E-Mail: _____

Manager: _____ Phone: _____

Jersey Color: _____ Alternate Color: _____

Recreational: _____ Advanced: _____ (CHECK ONE)

Entry Fee: \$500 per team (U8 - U18) _____ \$500 per team (Adult) _____

Additional Fees:

- >U.S. Indoor Soccer Association Yearly I.D. Cards per Coach/Player:
- (U6 - U14) = \$10 w/supplied photo----- \$11 w/o supplied photo
- (U16 - Adult) = \$15 w/supplied photo ----- \$16 w/o supplied photo

Circle Division Below

U6	Girls	Boys	Co-Ed	Men	Women
Boys & Girls	U6	U6	Open	Open	Open
	U8	U8	Over 30	D1	Over 30
	U10	U10		D2	D1
	U12	U12		D3	D2
	U14	U14		Over 30	D3
	U16	U16			
	U18	U18			

U.S. Indoor Age Groupings - **Your age on September 1st determines your division for the year.* A \$100.00 deposit must be paid at the time of registration to reserve league placement. All remaining fees and paperwork must be turned in before the registration deadline. Failure to pay all fees on time will result in league reservation forfeiture and the next team in line will be bumped on schedule to and into place. Players CANNOT be added to the league after the deadline. By signing below, you also agree to read and abide by all facility rules and regulations.

Coach/Manager/Player/Parent Signature: X _____