

Team _____ City _____

The undersigned, being of legal age, agrees to abide by the rules of the Airpark 3x3 Tournament and the Norfolk Soccer Club, Inc., and recognizing the possibility of physical injury associated with soccer and in consideration of the Norfolk Soccer Club, Inc. and the Airpark 3x3 Tournament accepting the player for its soccer tournament, does knowingly and freely assume all such risks and does hereby release, discharge and/or otherwise indemnify the Norfolk Soccer Club, Inc. coaches, staff, directors, personnel and tournament sponsors, including the owners of the fields, parking lot, and facilities utilized by the tournament, against any claim by or on behalf of the player, as a result of the player's participation in the tournament.

In which years were you involved in Express Soccer?

Players Full Name PRINTED	Address w/ City and Zip	** Signature of Player/Parent/Guardian
1		I have read and I understand
2		I have read and I understand
3		I have read and I understand
4		I have read and I understand
5		I have read and I understand
6		I have read and I understand
Coach's signature>>		I have read and I understand

Participated in Express as Parent. Player. Coach Other ____ Years

Player 1 _____ Player 2 _____

Player 3 _____ Player 4 _____

Player 5 _____ Player 6 _____

TEAM CONTACT/COACH'S NAME _____ ADDRESS _____ E-Mail _____

CITY _____ STATE _____ ZIP _____ Phone _____ <<<<<must have