

## 4GoalsCup Tournament

July 25-28, 2019

### Participant Form

Name

Address

City, State, Zip

E-mail

Phone

Current School

Birthdate

Age on January 1, 2019

Division(s) you are competing in this Tournament

Team Name(s)

Emergency Contact Name

Emergency Contact Phone Number

## Waiver and Insurance Information

All players/coaches/umpires must have their own medical coverage. Players will not be allowed to play unless the following information is submitted and the form is signed by participant and if needed, a Guardian.

Insurance Company

Insurance Company Address and Phone Number

Policy Number

I, the undersigned, hereby give permission for the staff of the Tournament to seek appropriate medical attention for the participant during the period of the Tournament and for the medical attention to be given and for the participant to receive medical attention in the event of accident, injury, or illness. I will be responsible for any and all costs of medical coverage policy. I further certify that I am of good health and have no physical or other impediment which would endanger me from participating in the tournament.

I, for myself, my heirs, executors, and assigns, hereby waive, release, and discharge the University, 4Goals, its officers, agents, and employees ("releases"), from any and all claims for damages for death, personal injury, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in the tournament, and I further agree to indemnify and hold harmless the University, 4Goals, its officers, agents, and employees from liability claim or action for damages which in anyway arise out of my participation in this tournament, even though that liability may arise out of negligence or carelessness on the part of releasees.

I further understand that accidents may occur during the tournament and that participants in tournaments may sustain personal injuries and or property damage as a consequence thereof. Knowing the risks of such activity, I hereby agree to assume those risks and to release and hold harmless the University, 4Goals, its officers, agents, and employees from any liability to me or my heirs or assigns for damages arising out of or related to my participation in this tournament.

Signature\_\_\_\_\_

Guardian Signature\_\_\_\_\_  
(If needed)

Date \_\_\_\_\_