

RECEIVED BY:



Kick It 3v3 Soccer Official Team Roster Waiver / Release of Liability

| | Ag | Age Division | | Kick It ID Number | | | | |
|--|---|---------------------------------------|---------------|--------------------------------------|---|--|--|--|
| Team Contact Person Name | | Email Address for Team Contact Person | | Phone (Home) for Team Contact Person | | | | |
| | | PLEASE READ BEFORE S | SIGNING! | | | | | |
| In consideration of being allowed to participate in any way in the Kick It 3/3 Soccer Tour, related events and activities (collectively, the "Event"), the undersigned, for himself/herself, his/her personal representatives, heirs, and next of kin: 1. Acknowledges, appreciates, and agrees that the risk of injury from the activities involved in the Event is significant, in cluding the potential for injury, permanent paralysis and death; 2. KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES or others, and assume all full responsibility for my participation; and, 3. Willingly agrees to comply with the stated and customary terms and conditions for participation. If however he/she observes any unusual significant hazard during his/her presence or participation, he/she will remove him/herself from participation and bring such to the attention of the nearest official immediately; and, 4. Acknowledges, appreciates, and agrees that he/she has read this form and understand that by signing this form, he/she is giving up legal rights and remedies on behalf of him/herself and his/her family, estat heirs, and/or assigns; and 5. Agrees that all audio/video recordings and pictures of the materials and any description may be used by the licensed party and is solely owned by Big Ticket Sports LLC and Big Ticket Sports LLC may copyright its name for its sole benefit and any such audio, video or picture recording of the event. 6. HEREBY INDEMNIFIES, RELEASES AND HOLDS HARMLESS BIG TICKET SPORTS LLC, GRAND SPORTS MANAGEMENT, LLC, KICK IT 3/3 SOCCER, HOOP IT UP 3on3 BASKETBALL, LET IT FLY 4on4 FLAG FOOTBALL, its affiliates, subsidiaries and parent entities, and their officers, officials, agents and/ or employees, directors, shareholders, other participants, sponsoring agencies, sponsors, advertisers and if applicable, owners and lessors of premises used to conduct the event ('Releases'). WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage t | | | | | | | | |
| | | | | | | | | |
| Player's Full Name | age of 18. Date of Birth | Email Address | Cell P | | Signature of | | | |
| *Players may sign if over the Player's Full Name (Please Print) | | Email Address | Cell P Num | | Signature of Player/Parent/Guardian ** I have read and I understar | | | |
| Player's Full Name (Please Print) | Date of Birth | Email Address | | | Player/Parent/Guardian ** | | | |
| Player's Full Name (Please Print) | Date of Birth | Email Address | | | Player/Parent/Guardian ** I have read and I understar | | | |
| Player's Full Name (Please Print) | Date of Birth mm/ dd /yyyy mm/ dd /yyyy | Email Address | | | Player/Parent/Guardian ** I have read and I understar I have read and I understar | | | |
| Player's Full Name (Please Print) | Date of Birth mm/ dd /yyyy mm/ dd /yyyy mm/ dd /yyyy | Email Address | | | Player/Parent/Guardian ** I have read and I understar I have read and I understar I have read and I understar | | | |
| Player's Full Name (Please Print) | Date of Birth mm/ dd /yyyy mm/ dd /yyyy mm/ dd /yyyy mm/ dd /yyyy | Email Address | | | Player/Parent/Guardian ** I have read and I understar | | | |

DATE: _____



Kick It 3v3 Soccer Tour Official Game Rosters



| Team Name: Division: Jersey Color(s): Player 1: Player 2: Player 3: Player 4: Player 5: Player 6: | Game 1 | Team Name: Division: Jersey Color(s): Player 1: Player 2: Player 3: Player 4: Player 5: Player 6: | Game 2 |
|--|--------|--|--------|
| Team Name: Division: Jersey Color(s): Player 1: Player 2: Player 3: Player 4: Player 5: Player 6: | Game 3 | Team Name: Division: Jersey Color(s): Player 1: Player 2: Player 3: Player 4: Player 5: Player 6: | Game 4 |
| Team Name: Division: Jersey Color(s): Player 1: Player 2: Player 3: Player 4: Player 5: Player 6: | Game 5 | Team Name: Division: Jersey Color(s): Player 1: Player 2: Player 3: Player 4: Player 5: Player 6: | Game 6 |
| Team Name: | | | |

^{*}Each roster box MUST be presented to AND initialed by referees prior to the start of each game. It is advised to have extra rosters available. Additional rosters are available at the Kick It headquarters*