Team Roster and Waiver Form			Parkville Labor Day Soccer Tournament Sponsored by Central Maryland Soccer Association & Parkville Recreation Council						2019
ackno	owledge and understand that rever discharge indemnity, the Central Maryland Socce NOTICE: Cent	at soccer is a dangerous s and hold harmless from ar r Association, the Parkville ral Maryland Soccer Assoc	sport and that there is a poss	sibility of injury to m actions or causes of ille United Soccer a of form of participant	y child. In consideration of action for liability for da and all related officers, din organizations. medical coverage. Insu	of my child's participation amages arising out of, or rectors, tournament reparance coverage is the reference of the period of t	on in the Parkville Lab or in any way related to resentatives, employe esponsibility of the par	or Day Soccer Tourna o, my child's participation es, agents and volunte rticipating teams and o	
COACH CONTACT NAME					ASSISTANT'S NAME				
PHONE (H) (W)		(W)	CELL:		PHONE (H) (W)		CELL:		
E-MAIL					E-MAIL				
#	PLAYER'S NAME		ADDRESS & ZIP			D.O.B.	PARENT'S SIGNATURE		DATE
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