



XL SOCCER WORLD TEAM ROSTER FORM & WAIVER

Team Name: _____ Division: _____ Season: _____ Year: _____

Coach's Name: _____ Phone Number: _____ Email: _____

By enrolling myself or my child at XL Soccer World understand that I/he/she attending any soccer program and using the facilities do(es) so at my his/her own risk. XL Soccer World and its owners, employees and agents shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by myself or my family in or about any programs on the premises.

I assume full responsibility for all injuries and damages which may occur in or about any premises and I do hereby fully and forever release, discharge and hold harmless XL Soccer World, all associated facilities, and its owners, employees, and agents from any and all claims, demands, damages, rights of action, present or future resulting from or arising out of any person's participation in any programs or use of its facilities.

Consent—I hereby grant the staff of XL Soccer World the authority to render judgment concerning medical assistance or hospital care in the event of an accident or illness.

IMPORTANT – ALL PLAYERS AGE 18 OR OVER MUST SIGN ROSTER & PARENT/GUARDIAN MUST SIGN RELEASE CLAUSE IF PLAYER IS UNDER AGE OF 18.

	PRINT FULL NAME	D/O/B	PHONE NUMBER	ADDRESS	EMAIL	SIGNATURE
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