



# Western MA Futsal League



Team Name: \_\_\_\_\_ Tournament Date: \_\_\_\_\_  
 Gender: (circle) Boys Girls League: (circle) U6 ~~U8~~ ~~U10~~ ~~U12~~ ~~U14~~ High School Co-ed Adult  
 Team Contact: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

By signing below I am financially responsible for the participation of this team. I am aware that a fee of \$25 will be my responsibility for any checks returned due to non-sufficient funds. Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Assumption of Risk:** We, the undersigned adult player or parent/legal guardian of players listed below, do hereby release and discharge Western MA. Futsal League, The City of Springfield, Gold Star Soccer and associates with the named above for all accidents and medical or dental expenses incurred as a result of participation in physically strenuous activity with the Western MA. Futsal League. To the best of our knowledge, the player is in good health and aware of any and all potential risks. We understand that neither the Western MA. Futsal League, The City of Springfield, Gold Star Soccer, associates, general managers, coaches, referees, nor the employees of the Western MA Futsal League will be responsible for nor assume any risk for any personal injury that may occur as a result of any activities before, during or after participation in the Western MA. Futsal League. We further discharge and hold harmless each of these entities from any legal or medical liability for injuries or loss as a result of any participation. In the event of an emergency or injury / illness, I grant permission for the applicant to be given treatment by a medical professional, and I will assume all responsibility for payment of any uninsured cost incurred.

## Team Roster

Player's Name	Player's Address	D.O.B.	Phone #	Email	Signature *
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					

\* Signature of parent/legal guardian required if player under 18 years of age. No player will receive Western MA. Futsal League permission to participate until signature is obtained and this form received by Western MA. Futsal League Management. Players not signing this form may subject their team to forfeiture and still assume all risks of playing.