

**CSAIU SPRING INVITATIONAL
TEAM ROSTER/LIABILITY RELEASE FORM**

TEAM NAME _____

DIVISION _____

In consideration of the furtherance of your purposes, objectives and aims, and in consideration of you permitting me to participate in your tournament, on behalf of myself, my heirs, executors, administrators and assigns, I hereby waive and release any and all rights and claims for damages which I may have against you, CSA Impact United Soccer Club, Goal 2 Goal, Lost Nation Sports Park, Cleveland Soccer Academy Limited, and CSAIU Partners, as well as any other person, sponsors, organization or corporation, their heirs, executors, administrators, and assigns who are providing services or assistance as a result thereof.

PLAYERS MUST HAVE THE RELEASE FORM SIGNED BY A PARENT OR GUARDIAN

PLAYER	PARENT OR GUARDIAN	DATE
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____
13. _____	_____	_____
14. _____	_____	_____
15. _____	_____	_____
16. _____	_____	_____
17. _____	_____	_____
18. _____	_____	_____
19. _____	_____	_____
20. _____	_____	_____
21. _____	_____	_____
22. _____	_____	_____