

7th Annual
 Dixie Invitational Soccer Tournament
 Nov. 26 & 27, 2010

APPLICATION QUESTIONNAIRE & WAIVER

Boys _____ Girls _____ Oldest Birth Year _____ Age Group U- _____
 TEAM NAME _____ Club _____ Team City _____
 Team Contact Person (other than coach) _____
 Address _____ City _____ State _____ Zip _____
 Day Phone(____) _____ - _____ Evening Phone(____) _____ - _____
 E-mail _____ Coach's email _____
 Coach's Name _____ Phone(____) _____ - _____
 Contact phone # during tournament- cell # _____
 2nd Contact phone # during Tournament- _____

To assist with proper placement and with processing your application for participation in this year's tournament please **complete** this application (1st page required with check, waiver/release due at check-in). Please return this application with a **Cashier's Check** in the amount of \$550 (U12-U18) and \$400 (U10 & U11), payable to **Dixie Invitational Soccer Tournament**, postmarked by Oct. 31, 2010. A roster and signed waiver will be required at check-in, along with player documents ie. Registration form, copy of birth certificate and current player card (for every player).

Mail To: Dixie Invitational Soccer Tournament
 P.O. Box 910817
 St. George, Utah 84790

2009/10 RECORD

OVERALL: Wins _____ Losses _____ Ties _____
 League: Wins _____ Losses _____ Ties _____
 Level of Play: Recreational _____ Division _____ (ex: Premier, D1 etc.)
 State Cup: Wins _____ Losses _____ Ties _____ Finish _____
 Other _____

TOURNAMENTS: Level (gold/silver/recreational)

1) _____ Level _____ Wins _____ Losses _____ Ties _____ Finish _____
 2) _____ Level _____ Wins _____ Losses _____ Ties _____ Finish _____
 3) _____ Level _____ Wins _____ Losses _____ Ties _____ Finish _____

Team Manager/Coach _____ Date _____

Notes:

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate or in consideration of my child being allowed to participate, in any way in the **DIXIE INVITATIONAL SOCCER TOURNAMENT**:

1. I agree that prior to participating, I will, or if I am a parent or guardian of a minor participant, will instruct such participant that he or she should inspect the facilities and equipment to be used, and if I believe anything is unsafe, I will immediately advise my coach (if I am participating as an athlete) or supervisor of such condition(s) and refuse to participate.
2. I acknowledge and fully understand that I (or my child), may be engaging in activities that involve risk of serious injury, permanent disability, or death, and sever social and economic losses which might result not only from my own actions, inactions or negligence by actions, inaction or negligence of others, the rules of play, or the conditions of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. I assume all the forgoing risks and accept personal responsibility for the damages following any such injury, permanent disability, or death.
4. Intending to be legally bound, I do hereby release, waive, discharge and agree not to sue the **Washington County KICKS**, host of the **DIXIE INVITATIONAL SOCCER TOURNAMENT**, it's affiliates, their respective administrators, officers, directors, agents coaches, and other employees or volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable owners and leasers of premises used to conduct the event, all of which are hereinafter referred to as "releasees," from any and all liability to each of the undersigned, his or her heirs and next of kin for any claims, demands, losses, or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise in connection with association or entry in and/or arising out of my travel to, participation in, and returning from competition of the tournament.
5. In the event that I (or my child) sustain injury or illness while competing in the **DIXIE INVITATIONAL SOCCER TOURNAMENT**, I hereby authorize any emergency first aid, medication, medical treatment, or surgery deemed necessary by licensed medical personnel. I also give my permission for attending medical personnel, including college trainers, to execute on my behalf my permission forms or other necessary medical documents and to act in my behalf if I am not immediately able to do so.
6. I hereby consent to allow my picture and/or voice likeness to appear in any official documentary, promotional, exclusive television, radio or film coverage of the **DIXIE INVITATIONAL SOCCER TOURNAMENT** and without compensation to me.
7. I understand that the **DIXIE INVITATIONAL SOCCER TOURNAMENT** will not sell any of my personal information to third parties unless I give my consent.

THE UNDERSIGNES HAVE READ THE ABOVE WAIVER AND RELEASE AND UNDERSTAND THAT HE/SHE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY VOLUNTARILY SIGNING THIS WAIVER.

COACH'S SIGNATURE _____ DATE _____

Team Name _____ **Gender** Male Female **Age group** _____

1. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

2. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

3. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

4. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

5 Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

6. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

7. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

8. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

9. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

10. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

11. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

12. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

13. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

14. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

15. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

16. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

17. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

18. Player _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

Coach _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____

Coach _____ Address _____ City _____ St _____ Zip _____
Phone (____) _____ Gender Male Female Birth date __/__/__ Age ____
Waiver Signature (if under 18 must be parent signature) _____