



WAIVER, TRADEMARK AND MANAGEMENT

By agreeing and submitting this waiver form for participation in the Chick-fil-A® 2009 Free Clinic Series, players acknowledge that there are risks connected with these clinics and its related activities. Said players release CMSportz, LLC, Chick-fil-A, Inc., CFA Properties, Inc., Anne Arundel County Recreation and Parks, Baltimore County Department of Recreation and Parks, Carroll County Department of Recreation and Parks, Harford County Parks and Recreation, Howard County Department of Recreation and Parks, the U.S. Youth Soccer Association and their member clubs and leagues, event sponsors, event charities (collectively known as the "event organizer"), and the workers, employees, and directors of each, from all causes of action, damages, suits and demands whatsoever on law or in equity, including but not limited to risk of injury from playing in the tournament and the risk of loss of personal property by theft or otherwise. Players acknowledge that their eligibility for NCAA, collegiate sports and local school districts vary and that event organizers are not responsible for determining each player's eligibility. It is each player's responsibility to contact his or her coach or athletic director before registering to determine how his or her eligibility would be affected, if at all, by registering for the Chick-fil-A® 2009 Regional Soccer Tournament.

Players acknowledge that event organizers may make sound recordings, photographs or motion pictures of them and may use such likenesses in TV, radio, video tapes and other media known or unknown, no matter by whom taken, in any manner for publicity, promotional, advertising, trade or commercial purposes, without the need to pay the players any fee.

Team Name: _____

Age Group: _____ **Gender:** _____

Coach Name: _____

Coach Email: _____

Coach Signature: _____

Player Name

Signature of Parent / Guardian

1) _____

2) _____

3) _____

4) _____

5) _____

6) _____

7) _____