2017 TARGET UNITED CUP WAIVER/ROSTER

(Must be read, understood, completed, and submitted with entry fees to be considered)

TEAM NAME: **AGE GROUP:** **GENDER:**

#	PLAYER NAME	PLAYER BIRTHDATE	GUARDIAN SIGNATURE

The parents/legal guardians of the minor children/players for the team listed above, by signing this Waiver form, hereby voluntarily release, waive, relinquish, and discharge the Target United Cup, AYSA Soccer Organization, the Ontario City Schools, and all affiliated organizations and their officers, directors, representatives, volunteers, and agents from any and all liabilities, claims, suits, actions, or causes of actions (whether anticipated or unanticipated) arising out of any and all actions, injuries, death, or damages of any nature incurred while participating in, or traveling en route to, and from the Target United Cup. The terms of this release and waiver are applicable to all. THE TARGET UNITED CUP games and activities, and all off the field actions while participating in the TARGET UNITED CUP. The team referenced above is solely responsible for providing for its own medical insurance for the players listed on this form and shall hold harmless the above organizations from any and all claims arising from their participation, whatsoever.

TEAM REP: **SIGNATURE:** **DATE:**

NO PLAYER WILL BE ALLOWED TO PARTICIPATE IN THE TARGET UNITED CUP WITHOUT A VALID WAIVER SIGNATURE ON FILE WITH ONTARIO YOUTH SPORTS.