

Bridgeforth Bash

January 21-22, 2023

Team Name: _____ Age Division: _____ BOYS TEAM _____ GIRLS
TEAM _____

Team Coach: _____ Email: _____

Mailing Address: _____ Phone: _____

By signing this waiver/roster, I affirm that my team has Tennessee state roster player cards if asked and/or insurance under TSSAA, US Club, or AYSO. **Initials:** _____

By signing this waiver/roster, I (Coach/Team Member/Parent), understand that the registered activities have an element of hazardous or inherent danger. I take full responsibility for my team's physical condition and actions. I agree to release the Giles County Soccer League, the Giles County Board of Education, and/or Giles County High School, its employees, sponsors, and volunteers from any and all claims and liabilities, loss or expenses that I may incur due to participation in this tournament. Everyone should remain in gym or foyer at all times. No warmup area is provided. Please follow these rules and keep us playing.

I give permission to seek medical attention for my child or player in the event that I cannot be located. **Initials:** _____

And if a player, coach, or team intentionally damages any school property, that person will be held liable for those damages. **Initials:** _____

Player Name	Date of Birth	Signature (Parent if under 18)	Date

As a coach or team manager of the above team, I attest that the information provided is correct for all rostered players. I understand that a violation of age requirements will result in the forfeiture of any games the player was used. I acknowledge and understand it is my responsibility to see that each player understands and abides by tournament rules. I hereby affirm each player (or parent) participating has read the personal release stated above, and signed his/her name.

Signature of Coach/Team Manager:

_____ Date: _____

ROSTERS ARE FINAL AT CHECK IN. REMEMBER TO CARRY PROOF OF AGE FOR ALL PLAYERS.
CHECK IN TEAMS AT LEAST 60 MINS PRIOR TO YOUR FIRST GAME.

Checks Payable to: Giles County Soccer Association