

# ADULT COED SOCCER

For Department Use Only

LEAGUE # 6090

Paid \_\_\_\_/\_\_\_\_/10 R# \_\_\_\_\_

Indiv. \$31 \_\_\_\_\_

Non Res. \$51 \_\_\_\_\_

Entered in class by \_\_\_\_\_

Waiting List: # \_\_\_\_\_ Rec'd by \_\_\_\_\_

## League Number: 6090

Registration will be by teams only.

**Registration starts February 1, 2010 with a deadline of March 5, 2010 to enter your team.**

This is a competitive adult soccer program for ages 25 and up. Players must be 25 by March 5<sup>th</sup> 2010 to be eligible. Games will be played on Sunday afternoons with the possibility of some Saturday afternoons as well. League play will start in mid March and will end mid June.

This is an 11-on-11 league, you must have at least 3 women on the field at all times and your roster cannot exceed 25 players.

There is a maximum of 10 teams for this league. *This is not a first come first serve sign-up.* If there are more than ten teams after the deadline, a point system will be used with Apex residents given priority.

### **FEES:**

**\$31.00 - Apex Residents**

**\$51.00 - Non-Residents**



Home Phone \_\_\_\_\_ Participant's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Special Concerns (Medical, Etc.) \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_ Team Name \_\_\_\_\_

Team Captain Name \_\_\_\_\_

Email: \_\_\_\_\_

### **Statement of Waiver**

I hereby assume all the risks and hazards incidental to the conduct of the activities. I release, absolve, and indemnify the Town of Apex, employees of the Town, volunteers, contractors and/or sponsors from all risks and hazards associated with the activities and in the event of injury, do expressly waive all claims against them. I understand that no insurance coverage is provided by the Town of Apex Parks, Recreation and Cultural Resources Department. I further give permission for proper emergency care to be rendered to myself should I not be able to give such permission.

As part of this approval, I acknowledge I may have the opportunity to review the premises, equipment and personnel qualifications to be used in conducting the activity. I also have the opportunity to discuss with program organizers potential hazards and risks that may be associated with the activity and take responsibility for doing so. Failure to exercise this option indicates my approval and acceptance. I understand the Town of Apex does not provide transportation to or from activities scheduled by the Apex Parks, Recreation and Cultural Resources Department. I grant my permission to allow my photo, as part of a group photo and without individual identifying information, to be used by the Apex Parks and Recreation Department for promoting programs operated or sponsored by the department.

**Participant:** \_\_\_\_\_