



# Kerrville Parks and Recreation ADULT SOCCER LEAGUE



## MINIMUM OF FIVE TEAMS NEEDED TO FORM LEAGUE

**Fees:** \$350.00 must be paid in full by 5:00 p.m. on the registration deadline.

**Schedules:** Games will be played on Tuesday and Thursday

**Manager's Meeting:** Will begin at 5:30 p.m. in the Parks and Recreation Department administration building, 2385 Bandera Highway. Rules, regulations, schedules, and awards will be discussed during meeting.

**SOMEONE FROM YOUR TEAM MUST ATTEND THE MANAGER'S MEETING!!**

For additional information please call (830) 257-7300 or e-mail [recreation@kerrvilletx.gov](mailto:recreation@kerrvilletx.gov).



## ADULT SOCCER REGISTRATION FORM

1. *I understand that a fee of \$350 must be paid in full by 5:00 p.m. on the designated registration deadline date.*
2. I understand that if there is are any conflicting dates on which my team cannot play, those dates will be here noted, and that the schedule will stand as it is printed.
3. I understand that if my team pulls out of the league or is suspended due to unsportsmanlike conduct, then all fees paid will be forfeited. Refunds will not be given.
4. I understand that rosters and liability waivers are due by the first game. Rosters need to be completed LEGIBLY with complete information.

I, \_\_\_\_\_, understand all the above statements, and am authorized to represent the sponsor and/or team entered below.

\_\_\_\_\_  
Signature (Team Representative)

.....  
Team Name: \_\_\_\_\_

Manager's Name: \_\_\_\_\_

Mailing Address\*: \_\_\_\_\_

Phone Number\*: \_\_\_\_\_ Email\*: \_\_\_\_\_

Second Contact (required): \_\_\_\_\_

Phone Number\*: \_\_\_\_\_ Email\*: \_\_\_\_\_

## Participant Release and Waiver of Liability

WAIVERS MUST BE TURNED IN TO THE PARKS AND RECREATION DEPARTMENT BEFORE ENTRY INTO THE FIRST GAME.

In consideration of my participation in the City Adult Soccer league activities, practices and games, hereby grant the Kerrville Parks and Recreation Department the right to record, broadcast, and otherwise exploit in any and all media my performance in the City Soccer League and to use my name and likeness, voice, and biographical information concerning me in connection herewith.

I assume all risks associated with my participation in the City Adult Soccer League and on behalf of myself and heirs, executors and administrators, in consideration of my participation in the League, I hereby waive all claims against and release and hold harmless the City of Kerrville, its agents and employees, upon whose property the event will take place, from and against any and all claims, damages, liabilities, causes of action, losses, costs, and expenses, including reasonable attorney's fees, arising out of or in connection with my participation in the City Adult Soccer League, including without limitation, death, any personal injuries or loss of, damage to or loss of use of property, which I may incur as a result of my participation in the City Adult Soccer League, including any death, personal injuries or loss of, damage to or loss of use of property which may be the result of negligence on the part of the City of Kerrville. I warrant that I am of legal age and that I have read and fully understand the foregoing terms. (If not, parent or guardian must sign and complete the additional waiver).

Team Name: \_\_\_\_\_

PRINTED NAME/NOMBRE	JERSEY NUMBER/NUMERO	SIGNATURE/FIRMA	DATE
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
10)			
11)			
12)			
13)			

**City of Kerrville Parks and Recreation  
Adult Soccer Participant Release and Waiver of Liability  
PARENT / GUARDIAN RELEASE (18 AND UNDER ONLY)**

WAIVERS MUST BE TURNED IN TO THE PARKS AND RECREATION DEPARTMENT BEFORE ENTRY INTO THE FIRST GAME.

In consideration of my participation in the City Adult Soccer league activities, practices and games, hereby grant the Kerrville Parks and Recreation Department the right to record, broadcast, and otherwise exploit in any and all media my performance in the City Soccer League and to use my name and likeness, voice, and biographical information concerning me in connection herewith.

I assume all risks associated with my participation in the City Adult Soccer League and on behalf of myself and heirs, executors and administrators, in consideration of my participation in the League, I hereby waive all claims against and release and hold harmless the City of Kerrville, its agents and employees, upon whose property the event will take place, from and against any and all claims, damages, liabilities, causes of action, losses, costs, and expenses, including reasonable attorney's fees, arising out of or in connection with my participation in the City Adult Soccer League, including without limitation, death, any personal injuries or loss of, damage to or loss of use of property, which I may incur as a result of my participation in the City Adult Soccer League, including any death, personal injuries or loss of, damage to or loss of use of property which may be the result of negligence on the part of the City of Kerrville.

I warrant that I am of legal age and that I have read and fully understand the foregoing terms. (If not, parent or guardian must sign.)

I represent and warrant that I am the parent or legal guardian for the Participant named above, that I am of legal age and that I have read and fully understand the foregoing Participant's release and agree for Participant and Participant's heirs, successors and assigns and for Participant's legal representatives to be bound by the terms thereof.

**Participant's Name:** \_\_\_\_\_

**Participant's:** \_\_\_\_\_  
Age Date of Birth

**Parent / Guardian:** \_\_\_\_\_  
Print Name

**Parent / Guardian:** \_\_\_\_\_  
Signature Date