

Soccer 4 Tots

Team Registration Form January 2018

	Player Name	D.O.B	Parent Name	Contact No	Email Address	Medical Condition
1						
2						
3						
4						
5						
6						
7						
8						

Which age group are you applying for (Circle Only One)

Soccer 4 Tots Players

Soccer 4 Tots Players

Soccer 4 Tots Players

UNDER 4

UNDER 5

UNDER 6

(4 x players on the field)

2 Substitutes

(Maximum 6 players per Team)

14min half – 7 min quarters - (Unlimited Interchange)

All Teams are to supply their own Jersey / Playing strip/kit. (Playing Bibs will be provided on the day as some Teams might clash in colours).

Team Manager Name: _____ Team Manager Signature: _____

Contact No: _____ Email: _____

Team Name: _____ (Team Manager/Coach to Pay by EFT or Cash 7 days prior)

Team Registration Fee \$ **360**

Declaration - I warrant that above information is true and correct. I warrant that the applicant player (and where the applicant player is under 18 years, the applicant player's parents/guardian/s) has read and agrees to abide by and be governed by the Playing Rules and hereby releases and indemnifies its officers, members and servants against any claim and compensation for any loss or injury sustained during any activity of Soccer 4 Tots and I acknowledge and agree that any claim for loss or injury will be a matter determined between the player applicant and the relevant insurance company. I warrant that the applicant player (and where the applicant player is aged under 18 years, the applicant player's parent/s or legal guardian/s) has read and understood the level of participant insurance cover offered through S4T insurance policy and, if they believe this cover is inadequate for their particular circumstances, that they acknowledge and agree to organize any additional insurances themselves I warrant that the applicant player grants S4T, its officers, members and servants the right to obtain medical care for the applicant player from any qualified person should the need arise in a case when the applicant player's legal guardians are not immediately available to grant authorization. I warrant that the applicant player agrees to pay all medical expenses involved in such a case. I warrant that the applicant player acknowledges and agrees that cancellation of the applicant player's application or subsequent registration may, at S4T's absolute discretion, result in the forfeiture of the applicant player's entire registration fee and at minimum 70% of the applicant player's registration fee. I warrant that the applicant player agrees to S4T using the applicant player's name and image in the promotion and marketing of S4T, its events and competitions and the commercial relationships that may be entered into in connection with such events and competitions. I authorize to charge the credit card with details I have listed above in the amount of the registration fee for the applicant player whose details I have provided above. The applicant player warrants that he is hereby warned of the risk of injury posed by the fixtures and apparatus located on and around the Soccer 4 Tots playing field including the goal posts, netting, steel posts and boarding.