adidas Warrior Soccer Classic
Memorial Day Tournament
Release Form

Team Name: _____ Division: _____ Boys/Girls

In consideration of the furtherance of your purposes, objectives and aims, and in consideration of your permitting me to participate in your tournament, on behalf of myself, my heirs, executors, administrators and assigns, I hereby waive and release any and all rights and claims for damages which I may have against you, adidas Warrior Soccer Classic, The Warrior Soccer Club, as well as any other person, sponsors, organizations or corporation, their heirs, executors, administrators, and assigns who are providing services or assistance as a result thereof.
Players must have the release form signed by a parent or guardian.

Signature of Parent/Guardian	Player's Name	Date
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