



CSA YOUTH FALL SOCCER LEAGUE

Cost \$60 per child for 6U and up, \$40 per child for 4U

****All player's representatives MUST sign consent and waiver form and include a copy of player's birth certificate.**

Call 903-849-5930 or 903-570-6036 if you have any questions

Mail to P. O. Box 425 Chandler, TX 75758

Deadline to Register is August 31, 2018

Please check one _____ 4U _____ 6U _____ 8U _____ 10U _____ 12U _____ 14U
(Birth year) '2015 '13-'14 '11-'12 '09-'10 '07-'08 '05-'06

Child's Name: _____ Gender: (Circle) Female Male

Date of Birth: _____

Parent/Guardian name: _____

Address _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone _____

Email: _____

Emergency Contact: _____ Phone Number: _____

Consent and Liability Waiver - Release of all claims (must be signed to participate)

I, _____ (parent/guardian), am the parent or legal guardian

of _____ (minor child)

As lawful consideration for my minor child being permitted to participate in the Chandler Sports Association, Program Camp, League or any other activity at or through the Chandler Sports Association, agree that neither my minor child nor I will make a claim against, sue, attach the property of or prosecute the Chandler Sports Association or any of or their agents, sponsors, and employees for damages for personal injury or property damage which my minor child may sustain as a result of my child's participation in these sporting activities. This release is intended to discharge in advance the Chandler Sports Association and their agents, sponsors, and employees from and against any and all liability, including for negligent actions, arising out of or connected in any way with my minor child's participation in the Chandler Sports Association program, camp, league or any other activity except for liability that may arise out of the willful or wanton misconduct of Chandler Sports Association, and their agents, sponsors and employees.

I FURTHER UNDERSTAND THAT SPORTS INVOLVE PHYSICAL CONTACT BETWEEN PLAYERS, THAT SERIOUS ACCIDENTS OCCASIONALLY OCCUR DURING SUCH SPORTING ACTIVITIES, AND THAT PARTICIPANTS IN SUCH SPORTING ACTIVITIES OCCASIONALLY SUSTAIN SERIOUS PERSONAL INJURIES (INCLUDING DEATH) AND/OR PROPERTY DAMAGE, AS A CONSEQUENCE THEREOF. KNOWING THE RISKS OF PARTICIPATION, NEVERTHELESS, I HEREBY AGREE THAT MY MINOR CHILD AND I ASSUME THOSE RISKS AND RELEASE AND HOLD HARMLESS CHANDLER SPORTS ASSOCIATION AND THEIR AGENTS, SPONSORS AND EMPLOYEES WHO (THROUGH NEGLIGENCE OR CARELESSNESS) MIGHT OTHERWISE BE LIABLE TO ME, MY MINOR CHILD (OR OUR HEIRS OR ASSIGNS) FOR DAMAGES

I attest that I am eighteen (18) years old or older and that my child is physically fit and have no known medical conditions which prohibit participation in this sport. My child and I agree to follow all laws, rules and guidelines regulating the conduct of the league, camp or clinic. I understand and agree that my child and I are responsible for the mechanical and/or operating condition of any and all sporting equipment provided by my child or by me for my child's use, and I agree that my child and I will continuously inspect and maintain all equipment used, even if we have obtained any of the equipment from Chandler Sports Association, and their agents, sponsors and/or employees.

I ALSO AGREE TO ABIDE BY THE CODE OF CONDUCT AND ETHICS FOUND ON THE CSA WEBSITE, CHANDLERSPORTS.ORG

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY FOR MYSELF AND MY CHILD AND A CONTRACT BETWEEN MYSELF, MY CHILD AND CHANDLER SPORTS ASSOCIATION AND THEIR AGENTS, SPONSORS AND EMPLOYEES, AND I HAVE SIGNED IT OF MY OWN FREE WILL.

I also agree that Chandler Sports Association and their agents, sponsors and employees may use my child's photograph in future promotions.

Parent Signature: _____

Date: _____

Print Name: _____

