

INTERNATIONAL-FRIENDSHIP CUP

Team Roster Form

Team Name: _____

Captain: _____

	#	AGE	Y.O.B.	Player Name	Players Signature
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With my signature here and in consideration of the forgoing, I, myself, my heirs, executors and administrators, waive and release all rights against the Orange County Great Park, City of Irvine and its officers, employees, agents, volunteers and representatives, International Friendship Cup, Newport Beach Women's Soccer, Zama Sports and their respective employees, volunteers and agents of any and all claims of damages, demands, actions whatsoever in any manner as a result of my participation in said games, including, but not limited to any injuries I might suffer. I acknowledge that I am aware of the inherent risks in participating in an event of this type. I attest that my team is physically fit and has sufficient training for the competition and a medical doctor has verified their condition. I certify that all of the forgoing information provided by me is the entire truth. Any un-sportsman like conduct on behalf of any of the players listed above will result in the entire team being banned from playing the remainder of the tournament. By signing below I acknowledge all the above conditions have been met and understood by all of the players.

 TEAM CAPTAIN/REPRESENTATIVE SIGNATURE DATE