

Fill out this form and copy onto your computer and upload on our website. By checking on the box on page 2, you agree to all conditions outlined on this form. Full payment may be sent by credit card through our website: [www.casori.org](http://www.casori.org)



This form must be completed for each soccer player (participant) No player will be allowed to participate in the Tam Tran Memorial Soccer Tournament, without this form properly executed, and on file.

PARTICIPANT'S NAME (type or print): \_\_\_\_\_

PARTICIPANT'S DATE OF BIRTH (mm/dd/yyyy): \_\_\_\_\_

I, the undersigned, in consideration for my voluntary participation in organized soccer, do hereby willfully acknowledge that my signature below attests to my understanding and agreement that:

My player status will be kept in good standing. I will not compromise myself in such a way as to do harm to the league or tournament, knowing that players may be dismissed from participation, with possible loss of payment or dues, for violent conduct or unsportsmanlike behavior on or off the field of play. I agree to pay for any and all damages to any property or indemnities caused by me willfully, negligently, or otherwise. I authorize my photograph, picture or likeness, and voice to appear in any documentary, promotion (including advertising), television, video, or radio coverage of the league or tournament, without compensation. Under any condition,

I am responsible for any and all medical expenses arising from my participation, both in practices and games and while travelling to and from these events. I have the right and responsibility to inspect the equipment and facilities prior to events and, if I believe that anything may be unsafe, I will advise the coach or supervisor of the condition and may refuse to participate. Participation assumes consent.

I hereby release, waive liability, discharge, hold harmless, indemnify, and covenant not to sue, CASO, Providence Immigrant Rights Coalition (PIRC), Brown University, the venue and Tam Tran Memorial Tournament, their associated directors, administrators, officers, managers, employees, coaches, trainers, volunteers, sponsors and advertisers, and other agents, estates or executors, from any and all liability or injury incurred in the conduct of, and my participation in the tournament. This includes owners, lessors, and lessees of premises, municipalities, government agencies, successors, heirs, and assigns.

I have completely read this document and fully understand its contents. I acknowledge that I have given up substantial rights by accepting this document and that I do so voluntarily. My signature attests to this on behalf of myself and my executors, personal representatives, administrators, heirs, next-of-kin, successors, and assigns.  
For those individuals eighteen (18) years of age and older:

\_\_\_\_\_ Check here to agree:  Date: \_\_\_\_\_  
Participant's Full Name