

RELEASE OF LIABILITY

I agree that I will abide by the rules of the Adult Coed Soccer League. Recognizing the possibility of physical injury associated with soccer, I hereby release, dis and/or otherwise indemnify the YMCA of Rapid City, it's employees and associated personnel, Soccer Rapid City and the Adult Mixed Soccer League against any on behalf of the registrant as a result of the registrant's participation in the Adult Mixed Soccer League program.

SEASON: _____

TEAM COLOR: _____

TEAM CAPTAIN: _____

TEAM MEMBERS:

| | NAME | SIGNATURE | E-MAIL | PHONE # | PAYMENT AMOUNT | | |
|----|------|-----------|--------|---------|----------------|----------------|-------------------|
| | | | | | FALL \$45 | SPRING \$45 | Insurance \$30 |
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