



TEAM INFORMATION SHEET

Club

Team

Age & Gender

State

Checklist

Team Info Sheet Official Roster Player Passes Medical Waivers
Permission to Travel

Contact Information

Coach Name

Alt. Contact Name

Coach Cell

Alt. Contact Cell

Coach Email

Alt. Contact Email

Notes

Medical Releases

I hereby certify that I am in possession of current medical release forms for each rostered player, signed by the player's parent/guardian. **Sign:** _____

Tournament Rules

I hereby certify that I have read and understand the rules for this tournament. Failure to abide by the rules, in relation to rostering, player eligibility, personal/team conduct and forfeits, may result in the removal of your team from this tournament. This list is not exclusive. **Sign:** _____

Score Keeping

I understand that, following the conclusion of each match, a team official must sign the game card, so to verify the score and any disciplinary action. Once signed, I understand that all information listed on the game card is deemed accurate and final. This includes failure to sign the card before leaving the field. **Sign:** _____

Parking Policy

I understand that my team must follow all instructions pertaining to the parking at each site and follow any posted signs. Failure to follow these instructions may lead to loss of parking privileges at the site. Cars illegally parked risk being subject to ticketing and/or towing, at the owner's expense. **Sign:** _____

For forms completed electronically, a typed name will suffice as a signature and agreement with the above statements.

