



# RHODE ISLAND SOCCER LEAGUE OVER 30

Member of the Rhode Island Soccer Association, Inc. and U.S. Soccer Federation

## 2009 Adult Player Registration "A" Form

Team Name: \_\_\_\_\_

First Name (PLEASE PRINT): \_\_\_\_\_ MI: \_\_\_\_\_

Last Name (PLEASE PRINT): \_\_\_\_\_

Street: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Area Code: (        ) \_\_\_\_\_

Birth Date: \_\_\_\_\_ Male  Female

This Amateur Player Registration Form is used as an "A" Form. I acknowledge that Soccer is a contact sport involving risk of serious injury, disability or death. Not all risks are foreseeable. In consideration of being allowed to participate, I agree to release, waive, and covenant not to sue the United States Soccer Federation, the United States Adult Soccer Association, the Rhode Island Soccer Association or the Rhode Island Soccer League Over 30 on account of injury, death, or property damage alleged to be caused in whole or in part by affiliates' actions or omissions.

I understand that the RISA and the RISLO30 player registration fee includes payment of an insurance premium for medical health coverage, which when combined with my primary medical insurance, will act as secondary coverage for any injuries. In the event that I do not have any primary health coverage, then this policy will act as my primary policy.

Player's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Team Representative: \_\_\_\_\_ Date: \_\_\_\_\_