

2025 Marauder Madness Player Registration

PLAYER NAME: _____ DOB _____ GRADE FALL 2025 _____

Address _____ Town _____

Phone # _____ Emergency Contact, Relationship, Phone # _____

MEDICAL INFORMATION:

- Does Your Child Take Medicine Regularly? YES NO. If “YES”, Describe medicine & reason: _____

Does your child require special medication to be taken in certain emergencies? YES NO. If “YES” please provide detailed, written instructions to the coach prior to participation in the program.

If “YES” describe medication: _____

My child is physically fit and has no medical or physical condition prohibiting him/her from participating in the Marauder Madness Tournament.

I, the parent or guardian of the player named above, do hereby give my permission in my absence for any necessary emergency medical treatment to be administered by a licensed physician. I also give my approval for his/her participation; I absolve, indemnify and agree to hold harmless the MOHS Marauder Madness Summer Tournament, its sponsors, coaches, and other participants from all such risks and hazards.

I, the parent or guardian of the above-named player, a minor, agree that I and the player will abide by the rules and regulations of the Marauder Madness Summer Tournament. In consideration of the player’s participation in the soccer programs intending to be legally bound, I hereby release and indemnify the Marauder Madness Summer Tournament, the owners and operators of the facilities used for the Marauder Madness Summer Tournament and their respective directors, officers, employees, agents and representatives from and against all claims, liabilities, damages or causes of action arising out of or in connection with the player’s participation, including, without limitation, player’s transportation to/from any program, which transportation is hereby authorized.

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

The Marauder Madness Summer Tournament, has put in place preventative measures to reduce the spread of COVID-19; however, the Marauder Madness Summer Tournament cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending Marauder Madness Summer Tournament could increase your risk and your child(ren)’s risk of contracting COVID-19. By accepting this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending Marauder Madness Tournament and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Marauder Madness Summer Tournament may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Marauder Madness Summer Tournament, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)’s attendance at the Marauder Madness Summer Tournament (“Claims”). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the Marauder Madness Summer Tournament, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Marauder Madness Summer Tournament, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Marauder Madness Summer Tournament. I/we have read this assumption of the risk and waiver of liability relating to coronavirus/covid-19, fully understand its terms, understand that I/we have given up substantial rights by agreeing to it and agree to it freely and voluntarily without any inducement.

PRINT TEAM NAME: _____ PRINT PLAYER NAME: _____

SIGNATURE OF PARENT OR GUARDIAN: _____ DATE: _____

SIGNATURE OF PLAYER: _____ DATE: _____