



Tuscarora Soccer Club 3v3 FACE OFF! Tournament Registration Form & Waiver

Team Name: _____

Age Group (Circle One): U9-Boys U9-Girls U10-Boys U10-Girls U11-Boys U11-Girls U12-Boys U12-Girls U13-Boys U13-Girls

Coach Name: _____

Coach Phone #: _____ Coach Email: _____

ALL PLAYERS AND A PARENT/GUARDIAN FOR EACH PLAYER MUST SIGN THIS WAIVER

I understand that by signing this document, I acknowledge and assume the risks inherent in the 3v3 FACE OFF! Tournament, and hereby relieve the Tuscarora Soccer Club and the Carrol Township Community Park of any and all liability.

Player's Name: _____ Birthdate: _____

Shirt Size (Circle One): YS, YM, YL YXL

Parent/Guardian Signature: _____ Date: _____

Player's Name: _____ Birthdate: _____

Shirt Size (Circle One): YS, YM, YL YXL

Parent/Guardian Signature: _____ Date: _____

Player's Name: _____ Birthdate: _____

Shirt Size (Circle One): YS, YM, YL YXL

Parent/Guardian Signature: _____ Date: _____

Player's Name: _____ Birthdate: _____

Shirt Size (Circle One): YS, YM, YL YXL

Parent/Guardian Signature: _____ Date: _____

Player's Name: _____ Birthdate: _____

Shirt Size (Circle One): YS, YM, YL YXL

Parent/Guardian Signature: _____ Date: _____

****Completed registration form and waiver with your check are due by July 22nd, 2022****

**MAIL REGISTRATION/WAIVER FORM ALONG WITH CHECK MADE PAYABLE TO TUSCARORA
SOCCER CLUB FOR \$180/TEAM TO:**

TSC/Cortney Kolak
125 Kathryn Drive
New Bloomfield, PA 17068

