# FLAG FOOTBALL TOURNAMENT – 2010 Super Bowl Battle
## Saturday and Sunday January 30th and 31st
## Registration Form (Captain Only) / **All Players Must Fill Out the 'Roster Form'

**Contact Information: (One Form Per Player)**

**Name**: _____ **Team Name**: _____

**Address**: _____ **Birthdate**: ____/____/____ **Age**:____ **Gender**: M F
Year Month Day

**City**: _____ **State** _____ **Zip** _____ **Parent/Guardian Name**: _____

**Day Phone**: _____ **Emergency Phone**: _____

**Email (Mandatory):**_____

**If currently a United Sports Member check this box:** ☐ **Membership #:** _____ **Exp Date:** _____

**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT**

I hereby release and discharge United Sports Training Center ("USTC"), its agents, employees, staff members, directors, and officers from any claims, responsibilities or liabilities for injuries or harm incurred as a result of my participation and/or my child's participation as a player or spectator in programs and activities, including rock wall activities at USTC.

I fully understand that: these activities involve risks and dangers of serious bodily injury, ("RISKS"); these Risks and dangers may be caused by my own actions or inaction's, the actions or inaction's of others participating in the activity, the condition in which the activity takes place, or the negligence of the "RELEASEES" named below; there may be other risk and social and economic losses either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation or that of the minor in the Activity.

I authorize USTC, its agents, employees, staff members, directors and officers to take whatever action is necessary, in their best judgment, in an emergency and I hereby release discharge USTC, its agents, employees, staff members, directors and officers from any responsibility or liability related thereto. I hereby grant USTC permission to use my and/or my child's name, picture or likeness in any printed media or any form of advertisement. I fully renounce any and all claims upon USTC for reimbursement for use of this material.

Participants Signature: _____ Date____/____/_____

**Tournament Information - - REGISTRATION DEADLINE IS JANUARY 23, 2010**

**Tournament Date:** **Saturday and Sunday January 30th and 31st**
**Times:** 9:00 AM – 4:00pm (separate pool times will be established)
**Games:** Two 22 min. running halves, with 1 min. warning (2nd half)
**Format:** 7v7 all eligible
**Playoffs:** 4 Divisional Winners - - tie breakers:
**1.** Head-to-Head **3.** Point Allowed
**2.** Point Differential **4.** Points Scored

**TEAM FEE:**
**$350**

**LATE FEE:**
$50
If **NOT** Registered by January 23, 2010

**Payment Information:**

**Please circle card type:**

MasterCard VISA

**Expiration Date:** _____

**Credit Card #:**

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**Annual Membership Fee:** _____ **+ League Fee** _____

**=Total Amount Due:** _____

**Cardholder Signature**:_____

**Check #** _____ **Cash:**_____

**Cash or Check Amount:**_____

**CHECK POLICY: $25.00 service fee for returned checks.**

**All checks should be made payable to "USTC" and mailed to:**
**United Sports Training Center**
**1426 Marshallton-Thorndale Road**
**Downingtown, PA 19335**

## Contact Information

**League/Tournament Director - Ryan Silhan**

- **(610) 466-7100**
- **Email: rsilhan@go2ustc.com**
- **Website: www.Go2ustc.com**
- **Fax: (610) 466-9314**

**Tournament Fee: $350 / team**

**NO REFUND POLICY**: All payments made to United Sports are non-refundable unless a league is cancelled by United Sports due to insufficient participation.