



ADULT FLAG FOOTBALL

Date: Saturday July 5, 2014
Sunday July 6, 2014

Entry Fee: Men's - \$285
Women's/Coed - \$230
After JUNE 29th, Add \$20 Late Fee

Location: TBD

Deadline: July 2, 2014 (Schedules sent July 3rd)

Time: 8:00am-8:00pm

www.fairfaxcounty.gov/parks/tournaments-for-turf/

Please complete entire registration and email, fax or mail back before the deadline.
Once your registration is received and processed, you will receive an email confirmation with a copy of your receipt of payment and any additional information needed.

Fax: 703-324-3975 Email: Rebecca.Frece@fairfaxcounty.gov
Address: 12055 Government Center Pkwy., Suite 927 Fairfax, VA 22035-1118
Please contact Rebecca Frece at 703-324-8759 if you have any questions.

Division: Men's Women's Coed

Team Name: _____ Team Captain: _____

Email: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Assistant Coach Name: _____

Phone: _____ Email: _____

Where did you hear about this tournament: (Circle One)

Flyer – FCPA website – Friend/Family – Email – Other

Special Requests: (We will try our best to meet all requests but cannot guarantee)

*Roster must be turned in with registration. Changes can be emailed by the Friday before the tournament.

<u>First Name</u>	<u>Last Name</u>	<u>Birth Date</u>
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
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14.		
15.		
16.		

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Payment Coupon

Name: _____ Team Name: _____

Email: _____

I would like to pay the registration amount of by (Check one)

- Cashier's Check or money order enclosed
- MasterCard/Visa Credit card (____/____/____/____)
Expires _____
- Cash

Signature Required: _____ Date: _____

Participant Waiver Form

To be signed at time of registration

The Fairfax County Park Authority requires that every participant must read this waiver form. Signature on this registration form signifies each participant has read, understands and abides by this information.

In consideration of being allowed to participate in any and all sports tournaments or related events being held, sponsored and/or officially presented or endorsed by the Park Authority, I, the undersigned, acknowledge, appreciate and agree that:

1. The risk of injury from the activities involved in these sport events is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and
2. I knowingly and freely assume all such risks, both known and unknown, and assume full responsibility for my participation; and
3. I understand that the Park Authority does not provide medical insurance coverage for activity participants and that any applicable medical insurance must be provided individually by such participant; and
4. I waive, release and discharge the Park Authority and sporting event venue from any and all claims, costs, expenses or liabilities arising out of or relating to my participation in the event and other services; and
5. I willingly agree to comply with the stated instructions and policies and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such attention of the nearest official immediately; and
6. I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin, hereby release, indemnify and hold the Fairfax County Park Authority, its partners/affiliates, and their officers, officials, agents and/or employees, other sport participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event or activity ("Releases") harmless with respect to any and all injury, disability, death, or loss or damage to person or property, to the fullest extent permitted by the law.

I, AS REPRESENTATIVE FOR THE _____ (team name), HAVE READ THIS WAIVER FORM, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature: _____

Date _____