

Boys
2018
adidas
National
Soccer Showcase
July 27 – 29, 2018



WAIVER FORM*

(Must be read, understood, completed and submitted prior to your first game assignment)

This form can be returned with your payment, mailed or emailed separately or turned in at the Showcase registration prior to your first game. The registration area will be set up at the Ehrnfelt Soccer Complex next to the main Field House. **This will be the only location that will be able to accept the Team Waiver forms.** If you can not supply the form prior to the event, a team representative must deliver it to Registration at the Ehrnfelt Soccer Complex a minimum of 1 hour before your first game.

Waivers can be mailed to *adidas National Showcase*, 10081 S. Bexley Dr., Strongsville, Ohio 44136 or emailed to boysteams@adidasnationalshowcase.com

Please note: No team will be allowed to play unless payment and waiver forms have been received **prior** to the first game assignment.

Team: _____

Division: _____

#	Player Name (Printed)	Player Signature	Parent / Legal Guardian of Minor

The parents/legal guardians of the minor children/players for the team listed above, **and those players who are age 18 or older, for themselves and on behalf of their family,** by signing this Adidas National High School Showcase Waiver form, hereby voluntarily release, waive, relinquish, and discharge the Adidas National High School Showcase, Strongsville Soccer Organization, Strongsville Soccer Club, The Strongsville City Schools, and all affiliated organizations and their officers, directors, representatives, volunteers, and agents from any and all liabilities, claims, suits, actions, or causes of actions (whether anticipated or unanticipated) arising out of any and all actions, injuries, death, or damages of any nature incurred while participating in, or traveling en route to, and from the Adidas National High School Showcase. The terms of this release and waiver are applicable to all Showcase games and activities, and all off the field actions while participating in the Adidas National High School Showcase. The team referenced above is solely responsible for providing for its own medical insurance for the players listed on this form and shall hold harmless the above organizations from any and all claims arising from their participation, whatsoever.

Team Representative: _____ **Signature:** _____

Date: _____

*** NO PLAYER WILL BE ALLOWED TO PARTICIPATE IN THE SHOWCASE WITHOUT A VALID WAIVER SIGNATURE ON FILE WITH THE ADIDAS NATIONAL HIGH SCHOOL SHOWCASE.**