



FALL SOCCER TRAINING REGISTRATION

Tormenta FC and the Ibis Foundation are partnering to offer a ten week training program for boys and girls in middle school and high school. The program's proven coaching staff will travel to each community to train once per week for a one and a half hour training session.

During the ten week period, teams will meet at The Clubhouse soccer fields to play in friendly matches between communities on five different occasions (every other Saturday). The Ibis Soccer Training Program will start the week of October 1st and will end the week of December 3rd, with final games being played December 8th.

Participant Name: _____

Participant Gender: M F **Participant Date of Birth:** _____

Participant Grade Level: 6 7 8 9 10 11 12

County Participant Attends School: _____

Participant's Current School: _____

Participant Shirt Size: YS YM YL YXL AS AM AL AXL

Parent/Guardian Name: _____

Parent/Guardian Address: _____

Parent/Guardian Email: _____

Parent/Guardian Phone: _____

Participant Cost: \$150

Please mail a check payable to Ibis Foundation, Inc. to the address listed below. Please make sure you include your child's name on the memo line of the check or include a copy of your registration confirmation that will be emailed to you upon submission of this form. Payment must be received by October 1st in order for your child to participate.

Mail Checks To:

Ibis Foundation, Inc.
Attn: Jennifer Woodard
2704 Old Register Rd., Statesboro, GA 30458

Waiver & Assumption of Risk

I, for myself, and/or for my child, as their parent/guardian sign this Waiver and Assumption of Risk in consideration of the opportunity to use the facility or participate in all activities or parties at The Clubhouse.

I, for myself, and/or for my child, as their parent/guardian hereby acknowledge that I am fully aware that there are risks inherent in the participation in and preparation for all activities at The Clubhouse, and the above described event, and I willingly and voluntarily assume such risks. These risks may include, but are not limited to, bruises, cuts, sprains, muscle strains, hernia, broken bones, heat exhaustion, concussion, and insect bites.

I, for myself, and/or for my child, as their parent/guardian have made myself aware of the physical requirements necessary for participation in all events at The Clubhouse and certify that I possess all of the necessary physical abilities, experience, training, and knowledge.

In the event of an accident, injury, illness or other emergency medical situation, I, for myself, and/or for my child, as their parent/guardian give my permission for the staff of The Clubhouse to seek appropriate medical attention and to administer appropriate emergency care, and that I am solely responsible for any medical costs arising out participation in the activities at The Clubhouse.

I, for myself, and/or for my child, as their parent/guardian further agree that the privilege of participating in the above described event is a valuable opportunity, and in partial consideration of that opportunity, I hereby forever release and discharge from liability of any kind arising out of my participation in or preparation for all activities at The Clubhouse.

I, for myself, and/or for my child, as their parent/guardian understand that in accepting this document, The Clubhouse does not waive any sovereign governmental or official immunity that might apply to itself, any state agency, or any state officer, employee, or volunteer.

Media Release

I, for myself, and/or for my child, as their parent/guardian give The Clubhouse the rights to interview, take photographs, other images, audio, and/or audiovisual recordings of me and or my child to be used in promotions, educations, internal training, website, social media, and/or fundraising materials. This includes, but is not limited to video tapes, pamphlets and brochures.

By signing this media release, I intend to legally bind myself, my minor children, my heirs, executors and administrators. I acknowledge that The Clubhouse shall have all the rights of copyright in and to such photographs and videotapes and may use such copyright fully.

I, for myself, and/or for my child, as their parent/guardian hereby release The Clubhouse and its officers, agents and employees from all liability connected with the taking and use of these materials as is authorized by The Clubhouse.

I for myself, and/or for my child, as their parent/guardian waive all rights, interests or claims for payment in connection with any exhibition of these materials.

If I do not agree, I must see attendant at Guest Services before proceeding to participate.

This consent is voluntary and I, for myself, and/or for my child, as their parent/guardian give it in the interest of public information, education, the furtherance of the goals of these institutions, or other lawful purposes. I acknowledge that I have legal authority to sign this form on behalf of myself, and/or for the minor whose name is mentioned.

By signing below, I have read and understand the above participation waiver.

Parent/Guardian Signature: _____