



ACADEMY / CAMP / EVENT REGISTRATION

CONTACT

Participant's Name (please print clearly) _____ Date of Birth _____ Male _____ Female _____

Street Address _____

City _____ State _____ Zip _____

Parent / Guardian's Name _____ Phone _____

Email _____

Emergency Contact _____ Phone _____

MEDICAL

Doctors Name _____ Phone _____

Insurance Company _____

Any Medical Condition to be Aware of? Yes No

If Yes Explain

INFORMATION



PARTICIPATION GUIDELINES

1. Arrive on time!
2. For camps, on the first day arrive 30 minutes early for check-in. Each day after arrive on-time.
3. BE EPIC! Come prepared! Bring your own equipment, snacks, ball, and water bottle.
4. Never take or use any gear or personal items that belong to others without permission.
5. If camp participant is not feeling well or showing signs of illness they must be kept home.
6. Give your coaches and the staff full attention and act quickly when asked to do a task.
7. Inform your coach or staff member if your child is to be picked up early from camp.
8. Participants will be polite, courteous, and respectful of fellow campers and coaches. Disrespect will not be tolerated.
9. We expect participants to display good sportsmanship when competing.

GEAR CHECKLIST: ball with name, sunscreen, water bottle, snacks, proper training gear running shoes, cleats, EPICALLY signed waiver!

Player Name (print clearly)

Date

Player/Guardian Signature

Date



PHOTO WAIVER

I hereby grant the EPIC Goalkeeping LLC permission to use my likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration.

I understand and agree that all photos will become the property of the EPIC Goalkeeping LLC and will not be returned.

I hereby irrevocably authorize the EPIC Goalkeeping LLC to edit, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

I hereby hold harmless, release, and forever discharge the EPIC Goalkeeping LLC from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I HAVE READ AND UNDERSTAND THE ABOVE PHOTO RELEASE. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENTS/GUARDIANS AS EVIDENCED BY THEIR SIGNATURES BELOW. I ACCEPT:

Player Name (print clearly)

Date

Player/Guardian Signature

Date

PHOTO WAIVER



RELEASE AND LIABILITY WAIVER

EPIC GOALKEEPING RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to participate in any way in the soccer activities, including tournaments, of EPIC Goalkeeping (the "Activities"), I, for myself for personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, AGREE, AND REPRESENT that I understand the nature of the Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activities and I have not been otherwise informed by a physician that I am incapable of participation in any sports. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activities.
2. FULLY UNDERSTAND THAT:
 - a) Sports are physical and can require considerable running, starting, stopping and physical exertion, in heat and humidity, and could potentially lead to injuries including, but not limited to, overheating dehydration, limb injuries and possible permanent disability, and death (the "Risks").
 - b) The Risks and dangers may be caused by my own actions or inaction's, the actions or inactions of others participating in the Activities, the condition in which the Activities take place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW.
 - c) There may be other risk and social and economic losses, either not known to me or not readily foreseeable at this time.
 - d) Each player is responsible for conducting him/herself safely and at a level consistent with his/her skill.
 - e) EPIC Goalkeeping does not carry player medical insurance, nor provide event security, and each player must maintain adequate health insurance to cover any injuries occurring as a result of participation in the Activities.
3. FURTHER:
 - a) I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activities.
 - b) I understand, acknowledge, and accept that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement is intended to be as broad and inclusive as permitted by the laws of the State of Florida and agree that if any portion hereof is invalid, the remainder will continue in full legal force and effect.
 - c) I agree that any legal proceedings related hereto shall take place in the City of Jacksonville.
4. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE OR HOLD LIABLE the EPIC Goalkeeping, its administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owner and lessors of premises on



which the Activities take place, (each considered one of the "Releases" herein) FROM ANY AND ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

ALL PLAYERS MUST SIGN THIS INJURY WAIVER BEFORE PARTICIPATING IN ANY EPIC GOALKEEPING ACTIVITIES. IF A PLAYER HAS NOT SIGNED THIS INJURY WAIVER, BUT ENTERS THE SOCCER FIELD, HE OR SHE IS DEEMED TO HAVE SIGNED THIS INJURY WAIVER.

Player Name (print clearly)

Date

Player/Guardian Signature

Date

LIABILITY WAIVER