Tuscany RESIDENTS ASSOCIATION

Team Registration Form

TEAM NAME: _____

Team Captain (resident) Name: _____ Address: _____

Phone: #_____ Email: _____

Emergency Contact: _____ Phone #: _____

Player #2 Name: _____ Address: _____

Phone: #_____ Email: _____

Emergency Contact: _____ Phone #: _____

Player #3 Name: _____ Address: _____

Phone: #_____ Email: _____

Emergency Contact: _____ Phone #: _____

Player #4 Name: _____ Address: _____

Phone: #_____ Email: _____

Emergency Contact: _____ Phone #: _____

Player #5 Name: _____ Address: _____

Phone: #_____ Email: _____

Emergency Contact: _____ Phone #: _____

Goalie Name: _____ Address: _____

Phone: #_____ Email: _____

Emergency Contact: _____ Phone #: _____

ALL PLAYERS MUST SIGN WAIVER BEFORE FIRST GAME AND HAVE PHOTO ID AVAILABLE

Tournament Waiver Form

TEAM NAME: _____

*****PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING - SEEK APPROPRIATE ASSISTANCE IF NECESSARY*****

IN CONSIDERATION of the Tuscany Residents Association (the "TRA") permitting the undersigned or the Participant to participate in the Program, the undersigned, for myself or the Participant, as the case may be, and for my or the Participant's personal representatives, heirs and next of kin, acknowledges and agrees with the TRA that:

1. I acknowledge that I am aware of the dangers, risks and hazards associated with my participation in, spectating at, or mere attendance at the Program. I acknowledge and agree that I am not required by the TRA or anyone else to participate in, spectate at or attend the Program, and that I am freely and voluntarily assuming any and all dangers, risks and hazards arising therefrom. I acknowledge that I am aware that it is a condition of my participation in the Program that I participate entirely at my own risk.

2. The TRA and its members, employees, agents, trustees, directors and officers and their helpers and assistants and each of them and their respective insurers, heirs, successors, assignees, administrators and executors (the "Releases") are not responsible for any loss, costs, damage, personal injury, ambulance services, death or property damage, however caused, arising from my participation in, spectating at and/or mere attendance at the Program, including without limitation negligence on the part of the Releases, breach of contract, occupiers' liability or any other tort or cause of action at common law, in equity or by statute.

3. I hereby remise, release, discharge, waive, indemnify and save harmless the Releases and each of them from any and all liability, costs (including without limitation legal costs on a solicitor-and-own-client basis), claims, damages, demands, actions and causes of action at law, by statute and/or in equity arising as a result of any loss, damage, personal injury, death or property damage that I may suffer, directly or indirectly, as a result of my participation in, spectating at and/or mere attendance at the Program.

4. I understand that by signing this document, I will forever precluded from suing or otherwise claiming against the Releases or any of them for any loss, damage, personal injury, death or property damage that I may sustain through my participation in, spectating at and/or merely attending the Program.

5. For the purposes of the herein provisions, the TRA is or shall be deemed to be acting as agent or trustee on behalf of or for the benefit of each of the Releases.

The foregoing provisions are intended to be as broad and inclusive as is permitted by the laws of the Province of Alberta, and if any portion thereof is held invalid, the balance shall continue in full legal force and effect.

_____	_____	_____
Signature Team Captain	Name (print)	Date
_____	_____	_____
Signature Player #1	Name (print)	Date
_____	_____	_____
Signature Player #2	Name (print)	Date
_____	_____	_____
Signature Player #3	Name (print)	Date
_____	_____	_____
Signature Player #4	Name (print)	Date
_____	_____	_____
Signature Player #5	Name (print)	Date