



# RIVERVIEW OVER 35'S SIX-A-SIDE



<b>TEAM NAME:</b>	<b>PREFERRED DIVISION (1 or 2):</b>
<b>TEAM MANAGER:</b>	
<b>TEAM MANAGER'S EMAIL:</b>	<b>TEAM MANAGER'S POSTAL ADDRESS:</b>
<b>MANAGER'S CONTACT NUMBERS: (HM)</b>	<b>(WK)</b> <b>(MOB)</b>

*Indemnity: We the under-signed hereby declare and agree that we are participating in the Riverview Over 35's Six-a-Side Competition at our own free will & entirely at our own risk. .*

*We agree to abide by all rules as determined by the organisers. We further warrant that we are in a fit state of health to play and understand that while risk management strategies are in place at this venue, I participate in this competition knowing that there are inherent risks involved with playing this sport.*

*Signature: All players that have signed this form, release St. Ignatius College, Riverview from any liability with relation to this competition, to the fullest extent of the law.*

*Unregistered Players: Any players who attempt to compete without first registering or who have not payed their fees are not entitled to Player Accident Insurance*

*I/We understand that I/we will put our team in jeopardy of being disqualified from this competition & future competitions by taking the field with unregistered players.*

### TEAM DETAILS

	FULL NAME	ADDRESS (inc P/C)	EMAIL	MOBILE #	D.O.B	SIGNATURE
1						
2						
3						
4						
5						
6						
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14						

*\* All fields of this form are to be completed in order to register, including a legitimate signature. Any fields left blank, filled incorrectly or containing misleading information will result in a void registration*

*\* This team registration form, along with the registration fee (\$925.00) must be submitted by Friday 01/10/10.*

*\* Submission details: Team registration form along with complete payment (cheque or money order made out to Saint Ignatius Collge, Riverview) must be mailed to:*

*Saint Ignatius College, Riverview*

*Gartlan - Six-a-Side Soccer Competition*



