



UNITED SPORTS

TRAINING CENTER

Team Information Required

Team Name / Division: _____
Team Captain: _____
Home Phone: _____
Email: _____

****All players on the roster must be added to the form below, and will not be able to participate until a signed waiver is on file for them.**

TEAM ROSTER

#	Name	Phone	Email	Parent / Guardian
1.	_____	_____	_____	_____*
2.	_____	_____	_____	_____*
3.	_____	_____	_____	_____*
4.	_____	_____	_____	_____*
5.	_____	_____	_____	_____*
6.	_____	_____	_____	_____*
7.	_____	_____	_____	_____*
8.	_____	_____	_____	_____*
9.	_____	_____	_____	_____*
10.	_____	_____	_____	_____*
11.	_____	_____	_____	_____*
12.	_____	_____	_____	_____*

***Release of Liability Clauses:**

I hereby release and discharge United Sports Training Center ("USTC"), its agents, employees, staff members, directors, and officers from any claims, responsibilities or liabilities for injuries or harm incurred as a result of my participation and/or my child's participation at USTC. I authorize USTC, its agents, employees, staff members, directors, and officers to take whatever action necessary, in their best judgment, in an emergency and I hereby release and discharge USTC, its agents, employees, staff members, directors, and officers from any responsibility or liability related thereto. I hereby grant USTC permission to use my and/or my child's name, picture or likeness in any printed media or any form of advertisement. I fully renounce any and all claims upon USTC for reimbursement for use of this material.