

**SHOWMEGOALS.COM- Where the games begin**

PO BOX 7589

Columbia, MO 65205-7589

## **TOURNAMENTS FOR ADULTS / WAIVER**

(I) Coach/ATHLETE INFORMATION: (Please print all Information)

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
MI

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Age

\_\_\_\_\_  
SEX (Male / Female)

\_\_\_\_\_  
Date of Birth (M/D/Y)

\_\_\_\_\_  
Email Address @ \_\_\_\_\_

(II) WAIVER:

Due to the competitive level of Showmegaols; I take full responsibility of any claims, and release and forever discharge showmegaols and associate affiliated with showmegaols for claims such as loss of any property, damages and any bodily injury to tournament/events promoted and hosted by showmegaols. Showmegaols owner and its affiliate will not be held accountable for any field incident or non field incident due to recklessness of any individual or team.

(III) SPORT/EVENT INFORMATION: \_\_\_\_\_ SOCCER \_\_\_\_\_ BASKETBALL \_\_\_\_\_  
 (CIRCLE ONE)

Coach's/Captain Name \_\_\_\_\_

Team Name \_\_\_\_\_

	Rooster Name		Phone Number	BIRTHDATE (mm/dd/yyyy)	WAIVER (Y/N)
	First	Last			
1					
2					
3					
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22					

Only one player or coach/captain need to complete registration form for any given tournaments/events. All participants in any tournament/events must sign the waiver sheet before participating in any tournaments/events. By signing "yes" on the waiver; individual acknowledge that showmegoals and the owner and any associate affiliated with showmegoals are released and forever discharge of any loss, damages, claims of any bodily injury to my person or any thing such as property damage due to any tournaments/events from showmegoals.

\_\_\_\_\_  
 Coach/Captain Signature                      (\_\_\_\_\_) Home Phone                      (\_\_\_\_\_) Work Phone                      \_\_\_\_\_ Email address

Emergency Contact Number                      (\_\_\_\_\_) Cell Phone                      (\_\_\_\_\_) Work Phone                      (\_\_\_\_\_) Home Phone

Athlete Under 18 years of age (Parent's or Guardian's Signature required) \_\_\_\_\_

Payment Method:  
 (circle one)                      Check (Local Only)                      Cash (Pay Onsite)                      Money Order                      Cashiers Check