



# Capital Futbol Club

## Spring 2016

### Juniors/Mighty Mites Registration Form



Player Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

Gender: M / F School Attending: \_\_\_\_\_ Jersey Size: \_\_\_\_\_

Academy Time Selected (Juniors ONLY): \_\_\_\_\_ Coach Req: \_\_\_\_\_

(\*Team Placement with a specific coach cannot be guaranteed\*)

**Mighty Mites (\$75)**    **Juniors U6-U10 (\$120)**    **Juniors U11-U14 (\$135)**

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Ph#: \_\_\_\_\_ Cell Ph#: \_\_\_\_\_

Email (Primary): \_\_\_\_\_@\_\_\_\_\_

Email (Secondary): \_\_\_\_\_@\_\_\_\_\_

#### Scholarship Application:

Total Gross Income earned by **ALL** adults in your household: \$ \_\_\_\_\_

How many adults are supported by your household income? \_\_\_\_\_ Children? \_\_\_\_\_

Child Support Received: \$ \_\_\_\_\_ Social Security Received: \$ \_\_\_\_\_

❖ **Please Attach One Of the Following As Proof Of Financial Need:**

- Proof of enrollment in a Public Assistance Program
  - SNAP, TANF, Housing (WIC no longer accepted)
- Proof of acceptance in Free or Reduced School Lunch Program

To the best of my knowledge, the information and the attached documentation are a true and accurate representation of my present financial standing. The deliberate misrepresentation of any information may result in the withdrawal of the player's scholarship.

I understand that in order to receive a scholarship, a deposit of:

**Mighty Mites (\$40)**    **Juniors U6-U10 (\$60)**    **Juniors U11-U14 (\$70)**

is due at the time the application is turned in.

Parent/Guardian Name (Print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Notice is Given**

Capital Fútbol Club (CFC) and its employees, agents, officers, directors, volunteers, members, managers, participants, operators, and sponsors shall not be responsible directly or indirectly for the activities of the person participating in any Club sanctioned or sponsored game, tournament, event, or activity.

**Voluntary Participation and Assumptions of Risk**

All persons are informed and made aware that sports and physical activities may be inherently hazardous activities and participants in CFC activities are voluntarily participating in these activities with CFC with full knowledge of the dangers involved in such participation. The participants and/or undersigned individual agrees to accept any and all risks or property damage, personal injury, or death that results in the participation in CFC activities by the participant, now, or in the future. The participants and/or undersigned individual hereby release the named parties from any present or future claims, including active or passive negligence, for property damage, personal injury, or wrongful death arising from the participation in activities with CFC.

**Covenant Not to Sue**

The participants are notified, understand, and agree that they will not make a claim against, attach the property of, or sue the parties being released, for injury, damage, or death, resulting from the active or passive negligence, or other acts, howsoever caused, by any employee, agent, volunteer, or contractor of CFC as a result of the participation of the participant in any CFC game, tournament, event, or activity.

**Indemnity Agreement**

The participant agrees to indemnify and defend the released parties against, and hold them harmless from, any and all claims, causes of action, damages, judgments, costs and expenses, including attorney fees which in any way arise from participation in CFC sanctioned or sponsored games, tournaments, events, or activities, including without limitation, the active or passive negligence, if any, of CFC and other parties. The participant shall defend, indemnify, and hold CFC, its officers, members, volunteers, employees, and agents harmless from and against any and all liability, loss, expense, including reasonable attorney fees, or claims for injury or damages arising out of the performance of this Agreement in proportion to and to the extent that such liability, loss, expense, attorney fees or claims for injury or damages are caused by or result from negligent or intentional acts or omissions of CFC, its officers, members, volunteers, agents, or employees.

**Read and Understood**

By agreeing, the participant has carefully read this agreement and fully understand its contents. The participant is aware that this is a release of liability, an agreement to assume risk, and agreement to indemnify the released parties, and an agreement to pay for damages that the undersigned willfully, negligently, or otherwise caused to the released parties. This participant is aware that this document creates legal obligations he/she owes to the released parties and signs the document of his/her own free will. I agree and represent that I understand the nature of soccer and related sport activities and that I am qualified in good health, and in proper physical condition to participate in such activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the activity.

**Player Name** \_\_\_\_\_  
**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**\*\*\*\* Office Use Only \*\*\*\***

Cash: \$ \_\_\_\_\_ Check #: \_\_\_\_\_ / \$ \_\_\_\_\_ Credit Card: \$ \_\_\_\_\_  
Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp Date: \_\_\_\_\_ CCV#: \_\_\_\_\_  
Name on Card: \_\_\_\_\_ **Credit Card Signature:** \_\_\_\_\_  
Billing Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Received By: \_\_\_\_\_ Date: \_\_\_\_\_ Notes: \_\_\_\_\_