

**The Canfield Cardinal Classic
WAIVER FORM***

(Must be read, understood, completed and submitted with entry fees to be considered)

Team: _____ Division: _____

#	Player Name	Player Signature	Parent/Legal Guardian of Minor

The parents/legal guardians of the minor children/players for the team listed above, **and those players who are age 18 or older, for themselves and on behalf of their family**, by signing this Canfield Cardinal Classic Waiver form, we hereby voluntarily release, waive, relinquish, and discharge the Canfield Cardinal Classic, Canfield Soccer Boosters, Canfield Local Schools, and all affiliated organizations and their officers, directors, representatives, volunteers, and agents from any and all liabilities, claims, suits, actions, or causes of actions (whether anticipated or unanticipated) arising out of any and all actions, injuries, death, or damages of any nature incurred while participating in, or traveling en route to, and from the Canfield Cardinal Classic. The terms of this release and waiver are applicable to all tournament games and activities, and all off the field actions while participating in the Canfield Cardinal Classic. The team referenced above is solely responsible for providing for its own medical insurance for the players listed on this form and shall hold harmless the above organizations from any and all claims arising from their participation, whatsoever.

Team Representative: _____ Signature: _____ Date: _____

***NO PLAYER WILL BE ALLOWED TO PARTICIPATE IN THE TOURNAMENT WITHOUT A VALID WAIVER SIGNATURE ON FILE WITH THE CANFIELD CARDINAL CLASSIC .**