

DFW HIGH SCHOOL ULTIMATE TOURNAMENT

February 13, 2010 Los Colinas Polo Fields in Irving, TX 10am-6pm

Registration Form

Date of birth:

Age:

Grade in school:

School Attending:

Address:

City:

, **Texas**

Zip Code:

Player's Name:

E-mail:

Text #:

Emergency Information:

Contact Name: _____

Contact Phone Number: _____

Insurance Provider: _____

Policy Number: _____

I understand that Texas, Ultimate! does not provide accident and hospitalization insurance, and there is some inherent risk or danger in participating in Ultimate activities. I do not hold Texas, Ultimate! or the Dallas Ultimate Association liable for accident or injury resulting from participation in the Ultimate Tournament on February 13 in Los Colinas, TX from 9:30am - 6pm.

*Team Parents will provide transportation to and from Los Colinas.. This event is intended as a one-day event. For reasons of expense and supervision, overnight stays are **NOT** encouraged by any team who is participating in the 2010 DFW High School Tournament.*

Further, by signing below, I give Texas, Ultimate! permission to use my player's image in it's promotional materials including, but not limited to, flyers, brochures, ads, and website. I understand my child's name will never be used in conjunction with their image.

Signature of Parent/Guardian

Date:

I have provided my team captain with the information necessary to complete our team bid. I promise to participate fully, respecting the letter of the rules of Ultimate and upholding the SPIRIT of the Game as the primary governing principle of competition.

Signature of Player

UPA ID