

LONE STAR STATE ULTIMATE TOURNAMENT

April 23, 2011 College Station, TX 9am-6pm

Player Registration Form

School: _____

Date of birth

Age

Year of Graduation

Name: _____

Address: _____

City: _____

State: TX

Zip: _____

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 that there is some inherent risk or danger in participating in Ultimate activities. I do not hold Texas, Ultimate! liable for accident or injury resulting from participation in the Ultimate Tournament on April 23, 2011 in College Station, TX from 9am - 6pm.

*Team Parents will provide transportation to and from College Station. This event is scheduled as a one-day event. For reasons of expense and supervision, overnight stays are **NOT** encouraged by any team who is participating in the 2011 Lone Star State Ultimate 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 a player'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 understand the rules and etiquette of Ultimate and promise to participate fully, respecting the **Spirit of the Game**.*

Signature of Player

USAU ID