Please complete and return to FVAA at 525 N. Main Street, Fuquay Varina, 27526 or fax to 552-8968

FVAA TRY-OUT REGISTRATION FORM 2011-2012

Tryouts will be held from May 16 to June 7
Tryouts will be at the Fleming Loop fields

- Pre registration is suggested. Mail forms: *FVAA Soccer Tryouts, 525 N Main St, Fuquay Varina, NC 27526*
- Please complete one form per team tryout.
- Check **www.**fvaa.org for updates on tryout info and maps to fields.
- Fleming Loop fields are located on HWY 42 towards Sanford, ¼ mile past Bridge St. Turn left onto Fleming Loop Rd.
- Please make every effort to attend all available tryouts. Check website for scheduled supplemental dates.
- Please allow 20 minutes for the check in process.

_____ U9 PDP/Academy teams (Player Development Program) true U9 player (8/1/02 – 7/31/03)	COED OR GIRLS ONLY
_____ U10 PDP/Academy teams (Player Development Program) true U10 player (8/1/01 – 7/31/02)	COED OR GIRLS ONLY
_____ U11 Academy teams true U11 player (8/1/00 – 7/31/01)	COED OR GIRLS ONLY
_____ U12 Academy teams true U12 player (8/1/99 – 7/31/00)	COED OR GIRLS ONLY

Please circle all that apply!
CHALLENGE TEAM OR CLASSIC TEAM BOY/COED TEAM OR GIRLS ONLY TEAM

AGE GROUPS

U11 U12 U13 U14 U15 U16 U17 U18

Player's Date of Birth **Player's current age - All players must try out in their true age group!!**

Player's Last Name | Player's First Name | Home Phone number

Parent's Names | Father business or cell phone | Mother business or cell phone

Street Address | City & Zip | Family email address

Team Child played on during spring 2011 Season _____(Team name & division such as recreational, challenge or classic)

Participant and Volunteer Waiver

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

1. IN CONSIDERATION of being permitted to participate in any Fuquay Varina Athletic Association activity, I and/or my minor child, our personal representatives, assigns, heirs and next of kin.
2. I ACKNOWLEDGE, agree, and represent that I and/or my minor understand the nature of Fuquay-Varina Athletic Association and that I and/or my minor child are qualified, in good health, and in proper physical condition to participate in such activity. I further agree that if at any time I believe conditions or equipment to be unsafe, I and/or my minor child will immediately discontinue further participation in the activity.
3. FULLY UNDERSTAND that: (a) Fuquay Varina Athletic Association activities involve risks and dangers of serious bodily injury, including permanent disability, paralysis and death ("risks"); (B) these Risks and dangers may be caused by me and/or my child's own actions, or inactions, the actions or inactions of others participating in the activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and responsibility for losses, costs and damages I and/or my minor child incur as a result of my participation in the activity.
4. Hereby accept and assume all such risks, known and unknown, and assume all responsibility for the losses, costs, and/or damages following such injury, disability, paralysis, or death, even if caused, in whole or in part, by the negligence of the "releasees" named below:
5. Hereby release, discharge, and covenant not to sue Fuquay-Varina Athletic Association, their respective member teams and leagues, their administrators, directors, agents, officers, volunteers, team members and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place. (each considered one of the "releasees" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise, including negligent rescue operations; and I further agree that if, despite this release and waiver of liability assumption of risk and indemnity agreement I and/or my minor child, or anyone on my and/or my minor child's behalf, makes a claim against any of the releasees, I will indemnify, save and hold harmless each of the releasees from litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.
6. I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, not withstanding, shall continue in full force and effect.

By my signature, I certify that I have read points 1- 6.

X_____ _____
Parent/Guardian Signature Date