



# SOCCER DOJO

## NASHUA WORLD CUP SOCCER DOJO WINTER SKILLS 2009/2010 APPLICATION/LIABILITY WAIVER/MEDICAL AUTHORIZATION

PLAYER NAME: \_\_\_\_\_ GENDER: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 PARENT NAMES: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 HOME PHONE: \_\_\_\_\_ WORK: \_\_\_\_\_ CELL: \_\_\_\_\_  
 WORLD CUP TEAM/CLUB/REC LEAGUE AFFILIATION: \_\_\_\_\_  
 T-SHIRT SIZE:       YS     YM     YL     YXL   AS     AM     AL     AXL

CLASS	DATE	TIME	WORLD CUP PLAYER	NON-WORLD CUP PLAYER
SOCCER TENNIS(4WK)	FEB 8TH-MAR 8TH	MON 6:00-7:00PM	\$50 <input type="checkbox"/>	\$70 <input type="checkbox"/>
SHOOTING/FINISHING	MAR 15TH-APR 12TH	MON 6:00-7:00PM	\$60 <input type="checkbox"/>	\$80 <input type="checkbox"/>

All effort will be made to place players in desired days/times. Soccer Dojo reserves the right to cancel/consolidate skill session days/times. Players may be asked to switch days/times where necessary. A minimum class size of 8 players is necessary and a maximum class size of 18 is adhered to. **Space is extremely limited. Please call to verify acceptance before start of class.** The Soccer Dojo Winter Skills Specialty classes are 4 to 5 week sessions 1hr/week dedicated to a particular focus. Cost assumes players attend one class per week. Non World Cup players may attend these sessions for the additional cost above. Unless other arrangements are made, please mail completed application and payment check to:

NWC SoccerDojo  
 c/o In The Net Sports Academy  
 P.O. Box 1652  
 Merrimack, NH 03054

This is to certify that my son/daughter listed above on the application section has my permission to participate in the Soccer Dojo Winter Skills program sponsored by Nashua World Cup at the Hampshire Hills Dome facility at 50 Emerson Rd. Milford, New Hampshire 03055 for the period of November 16<sup>th</sup>, 2009 through April 12<sup>th</sup> 2010. I recognize the normal dangers of injury and personal loss involved in participating or spectating in soccer. I hereby, for myself and any player for whom I am a parent or legal guardian release, hold harmless, and forever acquit Nashua World Cup, Soccer Dojo, Hampshire Dome, Hampshire Hills, their officers, agents, representatives, trainers, volunteers and employees from any and all actions, causes of action, claims or any liabilities whatsoever, known or unknown now existing or which may arise in the future, on account of or in any way related to or arising out of my son/daughter's participation in the Soccer Dojo Winter Skills program. Further, I assume all liability of any non-participants who accompany me to the Soccer Dojo Winter Skills and Hampshire Hills Dome facility.

In the event of injury or illness to my son/daughter, I hereby grant authority to a qualified physician to render such medical treatment as he/she deems necessary under the circumstances.

Medical Insurance & Policy Number: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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