



**The Colorado Rapids U-23
2008 PDL Tryout Registration Form
April 26th & 27th, 2008**

NAME _____

PARENT/GUARDIAN NAME (if under 18) _____

CITY _____ STATE _____ ZIP _____

PHONE _____ CELL PHONE _____

EMAIL _____

AGE _____ BIRTHDATE _____

PREFERRED POSITION (R OR L) _____

LIST SOCCER EXPERIENCE (e.g. Professional/ College/ High School/Club)- _____

LIST ANY INJURIES _____

Insurance Carrier: _____ Policy Number: _____

PARENT/GUARDIAN SIGNATURE (if participant is under 18):

DATE _____

\$75 REGISTRATION FEE IF PAID DAY OF TRYOUT.

CHECK ONE: CREDIT CARD CHECK

*****Check payable to Boulder Rapids Reserve*****

CREDIT CARD INFORMATION: # _____ EXP. _____

TYPE _____

**THIS FORM MAY BE MAILED TO "BOULDER RAPIDS RESERVE OPEN TRYOUTS"
BY April 21th 2008 OR PRESENTED AT DAY OF TRYOUTS WITH PROPER
SIGNATURES AND CHECK OR CREDIT CARD NUMBER FOR THE
REGISTRATION FEE of \$75.**

Mail Completed Forms and Payment To: **Colorado Rapids U-23 OPEN TRYOUTS
ATTN: PETER AMBROSE
2845 29TH ST. SUITE B
Boulder, CO 80301**

More information: Phone: (303)440-0809 or visit www.ColoradoRapidsU-23.com



COLORADO RAPIDS U-23 OPEN TRYOUTS PARTICIPANT WAIVER/RELEASE - ADULT (OVER 18)

I hereby request Golazo Inc. and The Colorado Rapids U-23 allow me to participate in the Colorado Rapids U-23 Open Tryout ("Tryout") in Boulder on April 26th and 27th 2008. I certify that I am in good mental and physical condition. I understand the inherent risks associated with the Tryout, and I also understand the inherent risks of participating the sport of soccer at this level.

I further understand that while participating in the Tryout, I may appear in a light that is unflattering, embarrassing, humiliating or otherwise detrimental to my reputation and rights to privacy.

In consideration of the Rapids allowing me to participate in the Tryout, I agree not to sue and forever release, waive and discharge the Colorado Rapids U-23, Golazo, Inc., the Premier Development League (PDL), and their respective employees, governors, affiliates, agents, partners, owners, members, parents, subsidiaries, representatives, officers, attorneys and players (hereinafter referred to collectively as "Releasees") from any and all liability to me, and my personal representatives, assigns, heirs, children, dependents, spouse and relatives for any and all claims, causes of action, losses, judgments, liens, costs, demands or damages that are caused by or arise from any injury (including death) to my person or property regardless of the cause(s) of such injury. I assume all risks associated with my participation in and observation of the Tryout.

I further grant the Releasees and their respective successors and assigns the perpetual worldwide and royalty-free rights to use my voice, photograph, and likeness in any media related to my performance in or observation of the Tryout including, without limitation, a videotape recording of such Tryout without compensation to me or my personal representatives, assigns, heirs, children, dependents, spouse and relatives.

I hereby acknowledge that I have carefully read this Liability Waiver and Release of Liability, that I fully understand its content, that I am over the age of **18**, and that I am signing this Liability Waiver and Release voluntarily and intend for it to be legally binding.

Name of Participant (**print**)

Signature of Participant

Address

City/State/Zip Code

Telephone Number

Date

Colorado Rapids U-23 Open Tryouts
2845 29th Street Suite B
Boulder, Colorado 80301
More information: Phone 303.440.0809 / www.coloradorapidsu23.com



COLORADO RAPIDS U-23 OPEN TRYOUTS PARTICIPANT WAIVER / RELEASE - UNDER 18

I hereby request Golazo Inc and Colorado Rapids U-23 allow my child to participate in the Open Tryout ("Tryout") in Boulder on April 26th and 27th 2008. I certify that my child is in good mental and physical condition. My child and I understand the inherent risks associated with the Tryout, and we also understand the inherent risks of participating in the sport of soccer at this level.

In consideration of Golazo Inc and the Colorado Rapids U-23 allowing my child to participate in the Tryout, I agree not to sue and forever release, waive, and discharge the Colorado Rapids U-23, Golazo, Inc., the Premier Development League (PDL) and their respective employees, governors, affiliates, agents, partners, owners, members, parents, subsidiaries, representatives, officers, attorneys and players (hereinafter referred to collectively as "Releasees") from any and all liability to me, my child and his or her personal representatives, assigns, heirs, children, dependents, spouse and relatives for any and all claims, causes of action, losses, judgments, liens, costs, demands or damages that are caused by or arise from any injury (including death) to his/her person or property regardless of the cause(s) of such injury. I assume all risks associated with my child's participation in and observation of the Tryout.

I further discharge the Colorado Rapids U-23, Golazo, Inc., the Premier Development League (PDL), and their respective successors and assigns the perpetual worldwide and royalty-free rights to use my child's voice, photograph, and likeness in any media related to my performance in or observation of the Tryout including, without limitation, a videotape recording of such Tryout without compensation to me, or my personal representatives, assigns, heirs, children, dependents, spouse and relatives.

I hereby acknowledge that I have carefully read this Liability Waiver and Release of Liability, that I fully understand its content, that I am over the age of 18, and that I am signing this Liability Waiver and Release voluntarily and intend for it to be legally binding.

Name of Parent or Legal Guardian

Signature of Parent or Legal Guardian

Name of Participant (**print**)

Signature of Participant

Address

City/State/Zip Code

Telephone Number

Date

Colorado Rapids U-23 Open Tryouts
2845 29th Street Suite B
Boulder, Colorado 80301
More information: Phone 303.440.0809 / www.rapidsreserve.com