



PMB 338, P.O.Box 10001, Saipan MP96950
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2010 PLAYER REGISTRATION FORM











(Please mark one box only)

Player Information

ID # :

Last Name : _____ First Name: _____

Date of Birth : (MM)____(DD)____(YY)_____ Contact Number: _____

Email : _____ School: _____ Grade: _____

Parent/ Guardian's Name: _____ Contact Number: _____

(for minor only)

Mailing Address : _____

YOUTH DIVISION :

Sex: Female / Male

- U6 (2004, 2005)
- U8 (2003, 2002)
- U11 (1999,2000,2001)
- U14 (1996,1997,1998)
- U18 (1991,1992,1993,1994,1995)

(Please mark one box only)

ADULT DIVISION

Women

Men

(Please mark one box only)

JERSEY Info:

Number :

(Only U14, U18 & Adult)

Size : YS /YM / YL
 AS / AM / AL
 AXL

ASSUMPTION OF ALL RISK, RELEASE AND WAIVER OF LIABILITY AND ADDITIONAL PROVISIONS

As the parent or legal guardian of _____ ("my Child"), I give my consent for him/her to participate in any youth football (soccer) practice, game or other activity conducted, sponsored, and/or administered by the Northern Mariana Islands Football Association ("NMIFA").

Assumption of All Risks of Injuries. I understand that participation in football, and related activities, involves rigorous activity, physical contact, and certain risks, and may result in injuries. (I further understand that the facilities used on Saipan may create additional risks and possibility of injury to my Child due to items that may be present including, but not limited to, exposed rock, coral, concrete, metal, broken glass, other refuse or debris, goals which are not anchored and other equipment which may cause injuries.) The injuries that may be suffered may include, but are not limited to, muscle strains and tears, broken bones, and even more severe injuries including, but not limited to, permanent paralysis, or even death. I am fully aware of the risks and possibility of injury involved and acknowledge that I am assuming the risk of any and all injuries that may be suffered by my Child by participating in NMIFA activities.

Release, Hold Harmless, and Waiver of Claims. Knowing these facts and in consideration of my Child's participation in NMIFA activities, I, acting as parent or legal guardian of my Child, on behalf of myself, my Child, and my heirs, assignees, and personal representatives, hereby release and hold harmless the NMIFA, all affiliated football clubs (including but not limited to the Independents Futbol Club, Paire Football Club(PFC), M.P. United Football Club and Matansa Football Club,Inc, Tanholdings Football Club), and all of NMIFA's and the affiliated football clubs' respective officers, directors, representatives, members, agents, employees, officials, sponsors, promoters, affiliates, coaches, and volunteer2s from any and all claims, liability, damages, loss, cost or expense (including but not limited to attorneys' fees and court costs), whether based upon negligence, active or passive, or any other act or omission, that my Child may incur, sustain, or suffer arising directly or indirectly out of or relating in any legal way to any NMIFA activity, and waive and promise not to sue any such person or entity based on any such claim, liability, damage, loss, cost, or expense.

I expressly agree that this release, hold harmless and waiver provision is intended to be as broad and inclusive as permitted under the laws of the Commonwealth of the Northern Mariana Islands, and that if any portion hereof is ruled to be invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Additional Provisions. I acknowledge that "NMIFA activity" as used in this document includes but is in no way limited to travel to and from any NMIFA event.

I acknowledge that I have read this document in its entirety and fully understand its contents. In addition to its other contents, I am aware that this document contains an acknowledgement of my voluntary and knowing assumption of any and all risks of injuries which may be suffered by my Child.

I further acknowledge that I have signed this document voluntarily and of my own free will.

Date: _____

Signature: _____

REPRESENTATIONS AND EMERGENCY AUTHORIZATIONS

I represent and warrant to the NMIFA that all facts stated in this document are true and correct. I further represent and promise that I will ensure my Child will wear appropriate safety gear, including but not limited to shin guards, during all practices and games and that it is my responsibility to monitor the whereabouts of my child at all times, prior, during, and after NMIFA activities and I shall do so. I further represent that my Child currently has no known physical or mental condition that would impair his/her capability for full participation in any NMIFA activity.

In case of medical emergency, and in my absence, I hereby authorize personnel associated with the NMIFA or its member football clubs to render first aid and/or transport my Child to a hospital or emergency medical facility for treatment.

Date: _____

Signature: _____

Payment : Cash _____ / Check # _____ Receipt #: _____

Received By : (name) _____ (signature) _____ (date) _____