**Recreational Registration with Tennessen Warning, LMC Model Form**

*League staff thoughtfully develops models for your city’s consideration. Models should be customized as appropriate for an individual city’s circumstances in consultation with the city’s attorney. Helpful background information on this model may be found in the information memo [“Data Practices: Analyze, Classify, Respond.”](https://www.lmc.org/resources/data-practices-analyze-classify-and-respond/)*

**City of** **\_\_\_\_\_**

**Soccer Player Registration Form**

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| Team Name: | Date: |
| Name: | Gender: | E-mail Address: |
| Address: | City: | State: | Zip: |
| Daytime Phone Number: | Evening Phone Number: |
| **Emergency Notification** |  |
| Notify: | Phone Number: |
| **Waiver and Release**I recognize the dangers and possibility of injury associated with soccer. I assume all risks in connection with this activity and acknowledge my participation is voluntary. I agree that the City and anyone acting on its behalf may not be held liable in any way for any event that occurs in connection with this activity which may result in injury or other damage to me. This waiver does not apply to injuries or damage as a result of willful, wanton, or intentional misconduct by the City or anyone acting on its behalf. I agree to defend, indemnify, and hold the City and anyone acting on its behalf harmless for any expense or liability as a result of my actions or omissions while performing this activity.**Tennessen Warning**Under the Minnesota Government Data Practices Act (Minn. Stat. § 13.548), your name, address, telephone number, and e-mail are private data. You may choose not to provide some or all of this private data, but it may limit your ability to participate in this program. For example, your contact information is needed to provide information to you such as team assignment, game schedule, cancellation information, etc. By signing below, you are consenting to allow registration information to be shared with city park and recreation staff, the coach, supervisor or instructor, and other registered program participants in order to administer this activity. This consent expires upon completion of this activity. |
| **By signing below you are agreeing to the Player Agreement and the Tennessen Warning. If you do not sign, you will not be able to participate in the program.** |
| Signature of Player:Signature of parent or guardian:(Required if player is under 18 years of age) | Date:Date: |