



**GIRLS 3 v 3 SOCCER  
TOURNAMENT  
FUNDRAISER  
FRIDAY, JUNE 5<sup>TH</sup> 2015**



**TEAM FORM (MAXIMUM OF 5 PLAYERS)**

**TEAM NAME:** \_\_\_\_\_  
**TEAM CAPTAIN:** \_\_\_\_\_  
**TEAM PLAYER:** \_\_\_\_\_  
**TEAM PLAYER:** \_\_\_\_\_  
**TEAM PLAYER:** \_\_\_\_\_  
**TEAM PLAYER:** \_\_\_\_\_

**PARENT CONSENT FORM**

**Player's Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**T-Shirt Size:** (circle) YM YL AS AM AL

**Team Name & Captain:** \_\_\_\_\_

**Parent's Name:** \_\_\_\_\_

**Parent's Email:** \_\_\_\_\_

**Parent's Cell Phone Number:** \_\_\_\_\_

I give permission for my child to participate in the Ridge Girls Soccer Program's 3 v 3 Soccer Tournament and release Ridge High School, the Ridge Girls Soccer Program and its team, coaches, and players from all liability or injury arising from or incident to participation of the above named child participating in the 3 v 3 tournament.

\_\_\_\_\_  
**Parent/Guardian Signature (required to participate)**

\_\_\_\_\_  
**Date**

**CHECKS PAYABLE TO: RIDGE GIRLS SOCCER**

**Mail forms to: Ridge Girls Soccer at 35 North Maple Road, Basking Ridge NJ 07920**