

**Premier League of America – Madison 56ers**

**2017 Tryouts  
Saturday April 22nd, 3-5PM**

**U-Bay Fields, University Bay Dr. Madison WI**

Cost: \$30. Mail check payable to Madison 56ers PLA together with registration form to:  
P.O. Box 28, Oregon, WI 53575

Registration Form:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Field position: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

I \_\_\_\_\_ certify that am in good health and able to participate in Madison 56ers PLA Soccer Club tryouts. I authorize all first aid, medical, dental, surgical, diagnostic and hospital procedures as may become necessary during the tryouts. I hereby discharge, waive, release, hold harmless, and indemnify Madison 56ers PLA Soccer Club, its board members, employees, volunteers, affiliated organizations, member organizations and sponsors, including the owners of the fields and facilities utilized during the tryouts of any and all liability that may arise from said participation, including but not limited to any injury. I acknowledge that I am responsible for any and all medical expenses due to my injury or illness. I understand that no one is authorized by Madison 56ers PLA Soccer Club to alter, modify, or waive any of the terms of this agreement in any way. I acknowledge I have read and fully understand this medical consent, release, and waiver.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_