



“ A charity soccer festival or the benefit of abused, abandoned, or neglected infants and children in foster care. Proceeds dedicated to Serenity’s Therapeutic Learning Center, its pediatric mental health program”.

By popular demand, **Serenity Soccerfest 2018** has a **NEW** format:
ONE DAY ONLY

ALL GAMES ARE 7 V 7 – SHORT FIELD

ENTRY FEE: \$325 or \$350 after April 1st

Women- Saturday, May 19, 2018

Walnut Ranch Soccer Park
20101 Amar Road, Walnut, CA. 91789
Divisions: 30, 40, 50, 57, 63

Coed - Sunday, May 20, 2018

Walnut Ranch Soccer Park
20101 Amar Road, Walnut, CA. 91789
Divisions: Open/18+, 30, 40, 50

Team Registration Deadline: April 30, 2018 (until filled)

All ages are pure as of December 31, 2018

No “gifts-younger” players in any division

There must be a minimum of 4 teams/per division – individual players welcome/\$35

Minimum 4 games; 2-25 minute halves

Team Entry Form- Women

Team Name: _____ Manager/Coach: _____
cell#: _____ email: _____
Shirt color: _____ Alternate: _____
Division (check one) 30 _____ 40 _____ 50 _____ 57 _____ 63 _____
Team Fee: \$325 _____ \$350 after April 1st _____

Team Entry Form- COED

Team Name: _____ Manager/Coach: _____
cell# _____ email: _____
Shirt color: _____ Alternate: _____
Division (check one) Open(18+) _____ 30 _____ 40 _____ 50 _____
Team Fee: \$325 _____ \$350 after April 1st _____

**One team check payable to Serenity, Inc. Foster Care and Adoption/mail to
600 S. Grand Ave. Covina, 91724.**

For credit card payments, call Serenity (Gladys) at 626 859-6200 or email info@serenitykids.com
Fees are non-refundable, unless event is cancelled. Payment must be submitted with entry form to reserve team’s spot. Players must check-in with photo ID# and receive wrist band before playing.
Rosters are due by Friday, May 11, 2018; changes may be made before first game.

Serenity Soccer-Fest! 2018

Roster and Waiver

TEAM NAME: _____ DIVISION: _____
 TEAM MANAGER: _____ PHONE: _____ EMAIL: _____
 STREET ADDRESS: _____ CITY _____ STATE _____ ZIP: _____
 CAPTAIN: _____ PHONE: _____ EMAIL: _____
 PRIMARY JERSEY COLOR: _____ ALTERNATE: _____

Please read and sign – Your signature indicates that you have read, understood, and agreed to these provisions: In consideration for being allowed to participate, in any way, in the Serenity Soccer-Fest and related events and activities, the undersigned:

1. Agree that prior to participating, they will inspect the facilities and equipment to be used, and if they believe anything to be unsafe, they will immediately advise their coach or supervisor of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions, or negligence but also that of others, the rules of play, or the condition of the premises and equipment used. Further, there may be other risks not known to Serenity or reasonably foreseeable at this time.
3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability, or death.
4. Release, waive, discharge and covenant not to sue Serenity, its affiliates, their respective administrators, directors, agents, coaches, and any other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and (if applicable) owners and leasers of premises used to conduct the event, all of which are herein after referred to as “releasees,” from demands, losses or damages on account of the injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise.
5. Understand that while Serenity does maintain liability insurance, this insurance does not include coverage for loss or damage to personal possessions; such insurance is the responsibility of the undersigned.

PLEASE PRINT NAME, YEAR OF BIRTH, AND EMAIL ADDRESS; PLAYERS MUST SIGN AT CHECK-IN; ROSTER CHANGES ALLOWED PRIOR TO TEAM’S FIRST GAME

LAST NAME,	FIRST	YEAR OF BIRTH	Signature	Email:

Signature of Team Manager _____ Date _____

For Serenity Use Only
 Date Received: _____ Check _____ Credit Card _____ Cash _____ Received by : _____