

**MERCER COUNTY AMATUER MASTER SOCCER LEAGUE  
PLAYER APPLICATION & AGREEMENT**

- (1) Please fill out the form below in its entirety.  
 (2) Sign and have witnessed the Hold Harmless Agreement.  
 (3) Attach cash or check as instructed by your Team Manager.  
 The exact amount is determined by your Team Manager and covers not only the League fee but also team fees for uniforms and such. If you have no team, attach \$100 deposit (make checks payable to MCAMSL). You will be subsequently placed on a team. Additional fees may apply.

- (4) Send these items to your Team Manager, or alternatively, Kirk LeCompte, MCAMSL, 30 Springwood Dr, Lawrenceville, NJ 08648  
 (5) *Questions?* Call your team manager or Kirk at 609-620-0127.

**NOTE:** If the League or Team manager has not received this application prior to game time, you will not be allowed to play. Teams that field players without signed agreements will be subject to suspension. For league rules and additional league information visit [www.mercermensoccer.net](http://www.mercermensoccer.net).

|   |                                  |                                  |                                  |   |
|---|----------------------------------|----------------------------------|----------------------------------|---|
| <b>Name of Player</b>                     |                                  |                                  |                                  | <p><b>HOLD HARMLESS AGREEMENT</b></p> <p><b>I, the player named on this application, agree that I have read and will abide by the rules, regulations, and code of conduct of the Mercer County Amateur Master Soccer League (MCAMSL).</b> I understand that this league was formed by volunteers for the sole purpose of my recreation and enjoyment in playing the game of soccer. I further understand that the league is a nonprofit corporation and, as such, was not created as a business enterprise. The persons running the league do so on a volunteer basis. I further agree and acknowledge that playing the sport of soccer does involve risk of injury or death. In consideration of the player's participation in the soccer league and intending to be legally bound, I hereby release and indemnify the Mercer County Amateur Master Soccer League, a nonprofit New Jersey Corporation, its officers, agents, employees and representatives from and against all claims, liabilities, damages or causes of action arising out of or in connection with the player's participation in the league including, and without limitation, the following: (i) injury or property damage for acts committed by others before, during and after the game; (ii) injury or property damage sustained due to the condition of the soccer fields, surrounding areas and the parking lot (all of which is not under the care and control of this league); (iii) injury or property damage sustained from the intentional and/or criminal acts of others (including players, fans or referees) that may be sustained before, during or after the game. Finally, I acknowledge and understand that the league will not provide security or police protection before, during or after the game.</p> <p>Player Signature: _____ Date: _____</p> <p>Witness Signature: _____ Date: _____</p> <p>Witness Name: _____</p> |
| <b>Date of Birth (m/d/y)</b>              |                                  |                                  |                                  |   |
| <b>Birthplace (country)</b>               |                                  |                                  |                                  |   |
| <b>Division(s)</b>                        | <input type="checkbox"/> over-19 | <input type="checkbox"/> over-30 | <input type="checkbox"/> over-40 |   |
| <b>Team(s)</b> (if known)                 |                                  |                                  |                                  |   |
| <b>Preferred Position</b>                 |                                  |                                  |                                  |   |
| <b>Preferred Postal Mailing Address</b>   |                                  |                                  |                                  |   |
| <b>Email Address</b>                      | (home)                           |                                  |                                  |   |
|   | (work)                           |                                  |                                  |   |
| <b>Phone Numbers</b>                      | (home)                           |                                  |                                  |   |
|   | (work)                           |                                  |                                  |   |
|   | (mobile)                         |                                  |                                  |   |
| <b>Employer Name</b>                      |                                  |                                  |                                  |   |
| <b>Emergency Contact Name &amp; Phone</b> |                                  |                                  |                                  |   |