

## Medical Waiver

I hereby voluntarily release and hold harmless the tournament organizers, Oakland Yard Athletics, its officers, officials, administrators and agents from all liability for all types of damages or injuries, whether foreseeable or not, sustained by myself, my child and other family members while participating, watching and/or traveling to or from this activity.

Player #1

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

(Parent or Legal Guardian if under 18)

Player #2

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

(Parent or Legal Guardian if under 18)

Player #3

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

(Parent or Legal Guardian if under 18)

Player #4

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

(Parent or Legal Guardian if under 18)

Player #5

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

(Parent or Legal Guardian if under 18)

Player #6

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

(Parent or Legal Guardian if under 18)

## Rules of the Game

### Player Registration:

Six-player maximum roster with 3 players on the field at a time. No double rostering within divisions will be allowed. There are no goalkeepers in 3 V 3. Roster subs after team's first game must be approved by a tournament official.

### Field Dimensions:

Length-30 yards, Width-20 yards.

### Goal Box:

The goal box is 8ft x 4 ft. The goals are 3ft x 6ft Players are not allowed to touch the ball in the goal box and there is no standing in the goal box. If attacking team touches the ball in the opponent's goal box, a goal kick is awarded to the opposing side. If a defending team touches the ball while their body is in their own goal box, a penalty kick is awarded to the opposing side.

### Goal Scoring:

A goal may only be scored from a touch within a team's offensive half of the field.

### No Slide Tackling

### Uniforms:

All players must wear like-colored jerseys/shirts during play and each team must have an alternate color.

### Game Duration:

(2) 12-minute halves separated by a 2-minute halftime. No time outs! Substitution is on the fly.

### Penalty Kicks:

Direct kick taken from middle of the centerline. All players stand to side. If no goal is scored, play is restarted by a goal kick for the opposing team.

### Goal Kicks:

Taken from anywhere along the endline of the field.

### Kick-Ins:

All indirect. Ball is kicked into play from the sidelines instead of thrown in. **Must be kicked below the knee.**

### No Offsides in 3 V 3 Soccer

### Shin guards are Mandatory

Teams are guaranteed no less than 3 games in the tournament. Division champions to receive awards for 1<sup>st</sup> place finishes.

Entry fee is non-refundable.

Rules subject to change. Please print complete rules from website:

[www.oaklandyardtournaments.com](http://www.oaklandyardtournaments.com)



**Friday April 2nd, 2010**

Great Competition! First Class Facilities!  
Experienced Organizers!

Location: Oakland Yard Athletics  
5328 Highland Road  
Waterford, MI 48327

Any questions please email  
[info@oaklandyardtournaments.com](mailto:info@oaklandyardtournaments.com)  
Call or text 248.701.1143

**OFFERING ON LINE REGISTRATION**  
[www.oaklandyardtournaments.com](http://www.oaklandyardtournaments.com)

Registration Deadlines and cost:  
\$120.00 per team, credit card or checks  
payable to: Oakland Yard Athletics

All registrations are due by:  
March 30th 2010 by 3:00pm

Schedules posted on website:  
[www.oaklandyardtournaments.com](http://www.oaklandyardtournaments.com)  
March 31st 2010 by 10:00pm

**Team Registration Form**

(Please Print)

**Gender: Male Female Coed**  
**Premier Select Recreational**

Team Name

Contact Person

Contact Person Phone#

Contact Person Email Address

Contact Person Street Address

City, State, Zip

Teams will be flighted into age groups based on the oldest team member's birthdate. In unexpected instances teams will be flighted in an age group and skill level, that we feel will be the best fit for your team.\*\* All players must carry proof of age \*\*

**Please circle age group & gender**

- U7 8/1/02 – 7/31/03 MALE OR FEMALE**
- U8 8/1/01 – 7/31/02 MALE OR FEMALE**
- U9 8/1/00 – 7/31/01 MALE OR FEMALE**
- U10 8/1/99 – 7/31/00 MALE OR FEMALE**
- U11 8/1/98 – 7/31/99 MALE OR FEMALE**
- U12 8/1/97 – 7/31/98 MALE OR FEMALE**
- U13 8/1/96 – 7/31/97 MALE OR FEMALE**
- U14 8/1/95 – 7/31/96 MALE OR FEMALE**
- HIGH SCHOOL 8/1/94 – 7/31/91 M OR F**
- ADULT - MALE OR FEMALE**
- ADULT COED**

**REGISTRATION & PAYMENT INFORMATION:**

For you convenience you may register and submit payment at Oakland Yard Athletics in person or contact them by phone @ 248.673.0100.

\*\*\*\*ON LINE REGISTRATION AT\*\*\*\*  
[www.oaklandyardtournaments.com](http://www.oaklandyardtournaments.com)

**Player #1**

Last Name First Name

Address

City State Zip

Phone Number Age Birthdate

E-mail: \_\_\_\_\_

**Club/Team affiliation** \_\_\_\_\_

*Each player must sign a medical waiver or have it signed by a parent or legal guardian if under 18*

**Player #2**

Last Name First Name

Address

City State Zip

Phone Number Age Birthdate

E-mail: \_\_\_\_\_

**Club/Team affiliation** \_\_\_\_\_

*Each player must sign a medical waiver or have it signed by a parent or legal guardian if under 18.*

**Player #3**

Last Name First Name

Address

City State Zip

Phone Number Age Birthdate

E-mail: \_\_\_\_\_

**Club/Team affiliation** \_\_\_\_\_

*Each player must sign a medical waiver or have it signed by a parent or legal guardian if under 18.*

\*\*\*\*ON LINE REGISTRATION AT\*\*\*\*  
[www.oaklandyardtournaments.com](http://www.oaklandyardtournaments.com)

**Player #4**

Last Name First Name

Address

City State Zip

Phone Number Age Birthdate

E-mail: \_\_\_\_\_

**Club/Team affiliation** \_\_\_\_\_

*Each player must sign a medical waiver or have it signed by a parent or legal guardian if under 18.*

**Player #5**

Last Name First Name

Address

City State Zip

Phone Number Age Birthdate

E-mail: \_\_\_\_\_

**Club/Team affiliation** \_\_\_\_\_

*Each player must sign a medical waiver or have it signed by a parent or legal guardian if under 18.*

**Player #6**

Last Name First Name

Address

City State Zip

Phone Number Age Birthdate

E-mail: \_\_\_\_\_

**Club/Team affiliation** \_\_\_\_\_

*Each player must sign a medical waiver or have it signed by a parent or legal guardian if under 18.*

Medical waiver must be signed on backside of form.  
**(OVER)**