Come and Enjoy...

- Central location; leagues cater to a variety of skill levels
- Play indoors on Victory Turf; cleaner than In-Fill Turf; no black rubber pellets getting in your shoes
- Meticulously kept player stats and league records; updated nightly on our website



Where Your

Competition

Plays!



Women's Lacrosse Registration Form

Epic Sports Center Indoor Youth League®



Scan for video!



Epic Sports Center 2793 Wehrle Drive Williamsville, NY 14221

Phone: 716-565-3742 Fax: 716-565-3663

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Our Lacrosse leagues are one of our fastest-growing indoor leagues. Leagues run November through April, on Saturday or Sunday evenings, in general at 5pm-10pm; "spill-over" games are on the occasional Monday. No player may play with spikes or outdoor field shoes; sneakers only. A \$200 deposit or payment in full must accompany this registration form; submission of this form does not imply final acceptance into the league. Ref fees are \$12 per game; all ref fees must be paid in cash to the refs pre-game. Any team forfeiting their game is billed for both teams' ref fees. Play is 7 vs. 7 on the field; two 22-minute halves plus warm-up time; there is an 18 person maximum allowed on your Roster.

The Roster is due by your third game; all players must be enrolled in grades 6-12; your coach/captain/ contact person must be over 21 and present at all games. Mouth guards are mandatory; goalies must wear full equipment; protective eyewear is recommended. All players must purchase a Player Pass ID Card (\$10) prior to their first game. Any player ejected from a game will receive a \$50 fine and an additional game suspension. Please see (1) The Captain's Letter and (2) the Indoor Sports Registration/Roster form for additional league/facility policies.

	League	League	Number	Team	Registration	า Full		
<u>SESSIONS</u>	<u>Starts</u>	<u>Ends</u>	of Games	<u>Fee</u>	<u>Deadline</u>	Payment Due		
		04/05/45		.=00	10/04/14			
Session II:			8	\$730	10/21/14	First Game		
Session III:	01/06/15	04/30/15	8	\$730	12/23/15	First Game		
DI 1								
Please check your								
session and division: Session II Session III Varsity Junior Varsit								
T N								
Team Name:								
Captain's Name:								
Address:			City:		Zipcode:			
•								
Day Phone: Evening			<u>ing Phone</u>	<u> Phone:</u>				
Comments/Requests/Special Needs:								
	•	•						



Epic Sports Center Soccer Official Roster/Waiver Release Form:

This Roster/Waiver will also be used for Flag Football, Lacrosse, Field Hockey, and any other sport deemed necessary

PLAYER ROSTER/WAIVER RELEASE FORM: Each of the undersigned (1) acknowledges that (a) he or she is a player over eighteen years old or the parent or legal guardian of a player under eighteen years old, (b) (or, if this form is signed by a parent or legal guardian, the player whose behalf the undersigned is acting) has a current player pass issued by USYSA, SODA or the Epic Sports Center and (c) there are inherent risks in participating in soccer, in-line hockey, lacrosses, field hockey, volleyball or any other sporting activities and assumes those risks, (2) consents to (a) any medical treatment for himself or herself (or, if this form is signed by a parent or legal guardian, the player on whose behalf the undersigned is acting) and using such pictures and videos for promotional, marketing and other purposes for no additional compensation, (3) for himself or herself and, if this form is signed by a parent or legal guardian, for the player whose behalf the undersigned is acting, releases and shall hold harmless Epic Sports Center and any officer, director, employee or other agent of Epic Sports Center from any liability arising in connection with any injury incurred while participating in any sporting activity at Epic Sports Center, (4) shall comply with (or, if this form is signed by a parent or legal guardian, shall insure that the person on whose behalf the undersigned is acting shall comply with) all rules and regulations of Epic Sports Center from time to time in effect, (5) indemnifies and holds harmless Epic Sports Center of each cost, expense, damage, liability and loss incurred by Epic Sports Center resulting from his or her failure (or, if this form is signed by a parent or legal guardian, the failure of the player on whose behalf the undersigned is acting) to follow any rules and regulations Epic Sports Center from time to time in effect, (6) indemnifies and holds harmless Epic Sports Center from time to time in effect, (6) guarantees the payment of all amounts payable to the Epic Sports Center by the

Jersey #	Last Name	First Name	Signature	Parent's Signature	Address	D.O.B.

I have been informed that all my players must sign the Player Roster/Waiver Release Form and if the player is under eighteen years old, a parent or legal guardian must also sign. All players must have matching jerseys with numbers and a player pass or be on a certified roster. **No pass, no play.** I understand that payment in full is required by the first game (unless prior arrangements have been made with the Epic Sports Center) and I am responsible for the payment of all team fees, referee fees, administrative fees, and any other amounts payable to the Epic Sports Center. I understand any player receiving a red card will be fined \$50.00 by the Epic Sports Center and this fine must be paid in full before he/she is allowed to play again. The player will still receive any game suspension that is warranted. I also understand that it is my responsibility to inform all my players of all Epic Sports Center rules.

Signature of Coach	(must be 21 years old