

TRAVELLERS PERSONAL DETAILS

PERSONAL DETAILS OF TRAVELER: (one form per traveler) PLEASE PRINT CLEARLY!!!

| | | |
|--|--------------|--|
| NAME OF TEAM _____ | | Player or Supporter |
| FULL NAME <i>(as stated in passport)</i> _____ | | PLAYER ID # _____ |
| BIRTH DATE (MM/DD/YYYY) _____ | AGE _____ | GENDER _____ |
| PARENTS/GUARDIANS NAME _____ | | |
| ADDRESS _____ | | |
| CITY _____ | STATE _____ | ZIP _____ |
| TELEPHONE (home) _____ | (work) _____ | (cell) _____ |
| **EMAIL ADDRESS (Player) _____ | | |
| **EMAIL ADDRESS (Parent/Guardian) _____ | | (for ALL future correspondence) |
| T-SHIRT SIZE (JERSEY SIZE) _____ | | (needed for all travelers) |
| PLAYER ID FROM COACH _____ | | |

PAYMENT/DEPOSIT: Deposit (\$500) to be applied with application.
Please include a check payable to **Ade Sport Management** or pay by **check**

FLIGHT OPTION:

| | |
|----------------------------------|-----------------------------------|
| ASM FLIGHT OPTION (YES/NO) _____ | BOOKING OWN FLIGHT (YES/NO) _____ |
|----------------------------------|-----------------------------------|

****This needs to be completed accurately as we will be booking/holding a set number of seats as soon as paperwork for your group is received. These seat requirements will be dependent upon flight information as listed here****

EMERGENCY CONTACT: (While on tour)

| | |
|------------------------|---------------------------------|
| NAME _____ | RELATIONSHIP TO PASSENGER _____ |
| TELEPHONE (work) _____ | (home) _____ (cell) _____ |
| Email _____ | |

MEDICAL RELEASE:

As parent or legal guardian of (insert minor's name) _____, I/we hear by authorize the coaches, trainers and chaperones of *ASM Soccer Tours* make decisions to proceed with any critical medical or surgical treatment required for my son/daughter provided an attempt to notify me/us has first been made. I/we agree to be responsible for any and all costs that may be incurred as a result of treatment and care. I/we agree not to hold ASM Soccer Tours and its staff liable and responsible.

***Please notify ASM Soccer Tours of any medical conditions no later than 30 days prior to departure.**

| | |
|---------------------------|------------|
| SIGNATURE OF PLAYER _____ | DATE _____ |
|---------------------------|------------|

| | |
|------------------------------------|------------|
| SIGNATURE of PARENT/GUARDIAN _____ | DATE _____ |
|------------------------------------|------------|

One form per each traveling player to be completed and mailed in or scan & uploaded with registration information.

ASM Tours are proud of the fact that they have not experienced any major disciplinary problems during past tours.

The following is a list of rules and expectations and various consequences:

1. Any use or possession of alcoholic beverages or drugs is strictly prohibited and may result in your expulsion from the tour. The families concerned will pay for the cost of early flights back to the destination.
2. Vandalism or stealing will result in expulsion from the tour unless there are extenuating circumstances.
3. Players are required to be in groups of two or more (buddy system format) when in shopping areas, swimming pools, sightseeing areas and during official tour functions.
4. Curfew for players will be at 10:30pm. This may be extended or shortened at the discretion of the coach or ASM Tours staff member.
5. Unlawful acts by any player will result in immediate expulsion from the tour and appropriate punishment by civil authorities concerned.
6. Lack of respect for the coaching staff and/or administrators may result in loss of privileges, i.e. absence from team games and functions or even expulsion from the tour.
7. Unauthorized absence(s) from games, practices or excursions may result in tour termination.
8. No player traveling alone will be allowed to undertake any activities without the prior consent of the coach / group leader.

It is understood that should a player be expelled from the tour for disciplinary reasons all expenses will be the responsibility of the player's family. No refunds will be given. ASM bears no liability for any costs incurred as a result of expulsion.

Liability Waiver and Parental Consent

Each participant should have approval to participate in any activities of ASM during the organized tour.

Parents/Guardians must acknowledge that participation in sports competitions carries with it a potential hazard.

Parents/Guardians must understand and assume all risks and hazards incidental to the conduct of activities and to the transportation to and from any and all activities. Parents/Guardians must acknowledge that in case of injury or death during the tour including any activities or transportation to or from such activity, they must release, absolve, indemnify and waive all claims against Ade Sports Management and its affiliates including but not limited to ASM Soccer Tours, and its organizers, suppliers, officials, and sponsors.

Date Traveling Player's name _____

Traveling Player's signature _____

Parent/Guardian's signature _____