## **TOURNAMENT REGISTRATION & TEAM CHECK-IN**

Thank you for registering for the 2025 Kingdom Cup! We are looking forward to a great tournament! To ensure all teams are prepared as we approach the date, here is a list of all items required for team check in! Team check in paperwork is DUE to be uploaded BY SEPTEMBER 10<sup>th</sup>!

ONLINE: We will accept Online registration until August 29<sup>th</sup>. All required documents can be uploaded to GotSport by logging in and clicking on Team Registrations → Kingdom Cup → Registration → Edit → Then Upload under fields. Example: Team Information Sheet (Choose File)

Upload Deadline: All Documentation must be uploaded by Wednesday September 10<sup>th</sup> by 5pm.

\*\*There will be NO team check-in at the fields!!

#### ALL TEAMS NEED THE FOLLOWING PAPERWORK FOR CHECK-IN

- 1. Team Information Sheet filled out Form Attached
- 2. Tournament liability release form <u>must be signed by</u> each player's parent/guardian. (Tournament Waiver and Release of Liability Form Attached)
- 3. Official 2025 Fall Team Roster
- 4. Player, Coach, & Team Manager cards with a photograph for each player provided by your team's Fall 2025 League (must have league signature).
- 5. Risk management for all coaches and team officials that will be on the player sidelines
- 6. Permission to Travel If team is from outside of Michigan or US Club Soccer team
- 7. Medical release forms on site with team Each player needs a Medical Release form from their state organization signed by parent or guardian. All US Club Soccer teams must have the US Club Soccer Medical Release. (We do not collect this)
- 8. Guest player paperwork and approval (if applicable) Players from within your own club do not have to have a Guest Player Form but MUST have a copy of their Official League Roster for Fall 2025. Guest Player Form and Instructions How to Submit Guest Player Form can be found at the following link: http://www.michiganyouthsoccer.org/AssetFactory.aspx?did=4096
- Concussion Policy -MSYSA coaches may provide the CDC Heads-Up Concussion Certificate. All other coaches may provide the CDC Heads- Up-Concussion Certification or the NFHS Concussion in Sports Certification. Team must be able to provide the Michigan department of Community Health/CDC Parent and Athlete Concussion Information Sheet for each player attending the tournament.

#### NON MSYSA REGISTERED TEAMS - US Club Soccer Registered Teams

- Risk management Approved Risk Management Certification from US Club Soccer
- Permission to Travel The approved roster printed from the US Club Soccer player registration system is 'proof of travel' approval from US Club Soccer.
- Medical release forms Medical release forms must be signed by the parent or guardian of each player. The US Club Soccer Medical Release is needed for each player.

## All other USSF affiliated teams registered or teams outside of Michigan (other state associations)

- Risk management cards Each organization's equivalent to a risk management card must be shown for all coaches and team officials that will be on the player sidelines
- Permission to Travel All USYSA teams traveling from outside Michigan must provide appropriate travel documents approved by their State Soccer Association.
- Medical release forms Medical release forms from the team's state organization must be signed by the parent or guardian of each player.

NOTE: TEAMS ARE NOT ALLOWED TO MIX USYSA (MSYSA) AND US CLUB SOCCER PAPERWORK TO REGISTER.



(CDC Heads Up or NFHS Certificate)

# 2025 Kingdom Cup TEAM INFORMATION SHEET



AGE GROUP			GENDER		DIVISION		
TEAM NAME							
Coach Name				Coach Pho	one		
Manager Name				Manager Pho	one		
HOTEL (if applicable)					•		
Please Circle ONE	MSYSA	US C			EIGN ational)		
Guest Players*	No Yes . *Only players from	n outs	# Guest Pl ide club are c	ayers # onsidered guest	Guest Rost	er(s)	
Please complete the form above and hand this form in at check-in. You must have the following document for check-in based on the requirements for the organization in which your team is affiliated. Please refer to the Tournament Registration & Team Check-In for details.							
OFFICE USE ONLY: NOTES:							
Official Team Roster (Fall 2025 League Roster - Including Guest Players with league signature)							
Tournament Roster & Liability Release (Alphabetical Order with PARENT Signatures							
Player Pass Cards (Verified)							
Coach / Assistant / Manager Pass Cards (Verified)							
Risk Management Coaches / Manager * (Proof coaches/managers can work w/ kids)							
Medical Release Forms * (Notarization NOT Required, keep with team manager)							
Permission to Travel (if out of state) (From Teams State Organization)							
Guest Player Form (If Applicable) (Official Fall 2025 League Roster for players within your club or guest players from other club.)							
Player & Parent Signed Concussion Forms (With team manager)							
Coach Concussion Certificate							

<sup>\*</sup>These items have different requirements for different organizations. Please refer to the Tournament Registration & Team Check-In.

# **Tournament Waiver and Release of Liability**

In consideration of being allowed to participate in the Tournament and related events and activities, we the undersigned:

- 1. Acknowledge and fully understand that each participant will be engaging in the activities that involve risk of serious injury.
- 2. Assume all foregoing risk and accept personal responsibility for the damage following such injury
- 3. Release, waive, and covenant not to sue the Kingdom Cup, Crusader Cup, Kingdom Soccer Club, Kingdom Indoor Center, LLC., ReThinkSoccer, LLC., West Michigan Youth Soccer Association, Michigan Youth Soccer Association, River Oaks County Park, Kalamazoo County, Kalamazoo County Parks and Recreation, Gull Lake Community Schools, Galesburg Community School, Kalamazoo Community Soccer Complex, Ramona Park, or any other site locations for the tournament any and all officials of the park, county, and tournament from demands, losses, or damages on account of injury incurred as a result of participation in the activities in the Tournament, including travel from said tournament.

Team Name:		Age & Division:	
	<u>Coach / Assistant /</u> Manager Printed Name		Coach / Assistant / Manager Signatures
Coach			
Assistant			
Assistant	22 900		
Manager			
	Printed Name Alphabetically (Last Name, First Name)	Jersey#	Signature of Parent or Legal Guardian of any players under the age of 18
	PLAYERS:		
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