

Iberia Soccer Association Field Reservation Form

Organization Name _____

Address _____

Phone Number _____

Contact Person _____

Contact Phone No. _____

Date	Time	Event Type <i>(Practice/Game/Tournament)</i>	ISA USE ONLY	
			Field Assignment	Fee

I have read and understand the ISA Field Use Policy and will abide by ISA Rules and Guidelines and I will abide by the Violation of Field Use Policy and understand and will pay the fines associated as such. I will abide by the rules and regulations of the Louisiana and Iberia Soccer Associations and its sponsors. In consideration for my participation in any use of Fields I and any of my team, spectators, or team representatives heirs, administrators and successors, intending to be legally bound, hereby release and indemnify LSA and ISA parties, the owners and operators of the facilities used for the programs, and their respective directors, officers, employees, agents and representatives from and against all claims, liabilities, damages or causes of action arising out of or in connection with participation in the programs at this facility.

Signature of Authorized Representative _____

Date _____