



MBA Human Foosball Tournament

August 5, 2017

1-5PM

Cost: \$5 per person, \$30 per team

Grass Field by Volleyball Court in Bay Point Park

Sponsored by: Musty-Barnhart Agency, Inc.

Teams must consist of 6 people

Each game is 10 minutes long, guaranteed two games per team

1st place prize--\$200, 2nd place prize--\$100

All teams must check in at 12:30PM ready for play

No special equipment needed

No cleats allowed

Soccer ball will be used

16 teams allowed in tournament

Players must be over 18

ALL team members MUST sign waiver form before playing

Registration is required. Please complete form below; and send information to:

For questions please contact Dee Whipple at MBA:

(651)388-7128 or dee@mustybarnhart.com

Foosball Registration Form

Team Name _____

Team Captain _____

Captain's Phone Number: _____ Email: _____

*Please Include Captain's Name in List Below

- 1) Player Name _____
- 2) Player Name _____
- 3) Player Name _____
- 4) Player Name _____
- 5) Player Name _____
- 6) Player Name _____

Payment enclosed (\$30 per team). Make checks payable to River City Days. Please send registration form and payment to: Red Wing Chamber of Commerce, 439 Main St., Red Wing, MN 55066

2017 River City Days Human Foosball Waiver

Whereas, I am participating in an event which forms part of the activities of the River City Days Festival; and whereas, I understand that my participation in the event could result in my suffering physical injury; IT IS HEREBY AGREED THAT I am entering this event at my own risk, and I agree to assume all responsibility for injuries to me which I may incur or suffer as a direct or indirect result of my participation in the event or for injuries I may cause to others. In addition, on behalf of myself, my heirs and assigns, I agree to hold harmless, release and indemnify the Red Wing Area Chamber of Commerce, River City Days Association, City of Red Wing, and Musty-Barnhart Agency, Inc. as a Co-Sponsor of the Human Foosball Event; and participating River City Days sponsors, their employees, agents, and volunteers, from and against all claims, causes of action and liability, known or unknown, arising out of my participation in this event. By signing below, I confirm that I understand the above statement and agree to participate in the Human Foosball event, accepting full responsibility.

TEAM NAME: _____
****ALL TEAM MEMBERS MUST BE AGE 18 OR OLDER****

Participant Name _____ DOB _____

Participant Signature _____ Date _____

Participant Name _____ DOB _____

Participant Signature _____ Date _____

Participant Name _____ DOB _____

Participant Signature _____ Date _____

Participant Name _____ DOB _____

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