



PLAYER MEDICAL RELEASE TEAM CERTIFICATION



I certify that the team has a 2022 Medical Release for every player on the Sporting Arkansas Tournament Team Roster and that the Medical Release forms will be present at all the team's tournament games.

Team Name, Age and Gender:

(EX: Sporting Arkansas 03B where it says Click here to enter text)

Team Manager/Tournament Contact (Type Full Name):

Date:

Team Manager/Tournament Contact Phone #:
