



2025
M & D Sports Services
Independent Contractor/Waiver Form
Return to 9834 Palm St. NW, Coon Rapids, MN 55433
or email to mnrefassignor@comcast.net

Name _____

Address _____

City _____ State _____ Zip _____

Cell Number _____ Parents Cell _____
(if under 18)

Email _____

Date of Birth _____ Current Age (at the signing of this form) _____

Documentation of Age: _____ Please attach a proof of age: birth certificate, drivers license, passport, approved ID for minors

USSF Grade _____ Experience _____ Comfort Level _____ Center _____
GR, Reg, Nat... Years AR
List ages you are comfortable with

Please Initial ALL statements:

_____ I am NOT a full or part time employee of M & D Sports Services

_____ I am an independent contractor and offer my services only when I am available.

_____ I am an independent contractor and offer my services to organizations other than M & D Sports

I understand that M & D Sports Services does NOT provide me with any form of medical, liability, or worker's compensation insurance coverage. I unconditionally release, waive, and consent not to sue M & D Sports Services (M & D), officers, directors, administrators, agents, coaches, other employees, and volunteers of the M & D, sponsoring agencies, sponsors, advertisers, for any & all liability to the undersigned, their heirs & next of kin. This is for any claims or losses on account of injury, including death, or damage to property

Signature

Date

Signature of Parent/Gardian, (if under 18 yrs)

Date