



MICHIGAN YOUTH SOCCER LEAGUE (MYSL)

AFFILIATE MICHIGAN STATE YOUTH SOCCER ASSOCIATION (MSYSA USYSA/USSF/FIFA)

PLAYER REGISTRATION FORM

Photo

NAME OF PLAYER: \_\_\_\_\_  
FIRST LAST MIDDLE

DATE OF BIRTH: \_\_\_\_\_  
MONTH DAY YEAR (please attach proof of birth if required)

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE #: \_\_\_\_\_

I voluntarily desire to play soccer for:

CLUB NAME: \_\_\_\_\_

TEAM NAME: \_\_\_\_\_

AGE GROUP: \_\_\_\_\_  BOY  GIRL

PREVIOUSLY REGISTERED WITH: TEAM NAME \_\_\_\_\_ AGE GROUP: \_\_\_\_\_

I understand that signing this form binds me to the above named team for the entire seasonal year (Both Fall/Spring) unless an application for a transfer is applied for and granted.

SIGNATURE OF PLAYER: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF PARENT OR GUARDIAN \_\_\_\_\_ DATE: \_\_\_\_\_

The undersigned parent or guardian represents that the player is in good health and can participate in competitive soccer and furthermore understands the rules set forth in U.S.S.F. rule 2103, section A, B, C, D, and can be met.

I Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence of others, the rules of play, or the condition of the premises or of any equipment used, and acknowledge further, that there may be other risks not known or not reasonably foreseeable at this time;

Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death. Release, waive, discharge and covenant not to sue the MSYSA, its member Associations, affiliated clubs, or teams and their respective administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leaser's of premises used to conduct the event, all of which are hereinafter, referred to as "Releases" from demands; losses or damages on account of injury, including death or damages to property, caused or alleged to be caused in whole or in part by the negligence of the "Releasee" or otherwise.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

Printed Name of Parent or Guardian \_\_\_\_\_