

Uniform – Please Indicate if sizes are to be Youth or Adult (ie

Youth Small, Medium Large X Large

or **Adult** Small, Medium, Large, X Large, XX Large)

Jersey Size _____

Short Size _____

Sock Size _____



Completed by League Representative

Amount Pd _____ How many reg _____

Circle - Cash - Check or Money order # _____

Notes:

M.Y.S.A.M.I.

Player Information (Please Print)

Last Name: _____ First _____ Nick Name _____ Boy or Girl Home Phone # _____

Address: _____ City _____ Zip Code _____ Birthdate _____ Age (as of Dec 1) _____

Playing Level: U4 U6 U8 U10 Junior High Years of playing experience _____ Special Notes: _____

Parents or Legal Guardian Information (Please Print)

With whom does the minor child reside? _____ relationship _____ cell phone _____

Is anyone else legally responsible? Y N (If yes please list name and contact number) _____

Alternate Emergency Contact: _____ relationship _____ telephone _____

Email address: _____ Medical Notes/Allergies: _____

_____ I may be interested in coaching or helping with the soccer association in some other way. please contact me for additional information.

Insurance Information

Named Contract Holder _____ Insurance Carrier _____

Contract or ID number _____ Group number _____ Telephone number: _____

ASSUMPTION OF RISK, RELEASE OF LIABILITY & CONSENT FOR MINOR PARTICIPANTS - READ BEFORE SIGNING

I, the undersigned parent, request voluntary participation for minor to participate in all events and activities of Marysville Youth Soccer Association. I consent to my/minor's participation in the activities and acknowledge that I fully understand my/minor's participation may involve risk of serious injury or death, including losses which may result not only from my/minor's own actions, inactions or negligence, but also from the actions, inactions, or negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted, and/or the rules of play of this type of event or activity.

I certify that my/minor is in good health and has no physical condition that would prevent participation in this activity. Furthermore, I agree to use my/minor's personal medical insurance as a primary medical coverage payment if accident or injury occurs. I consent to emergency medical treatment in the event such care is required.

The risk of injury to my child from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,

- 1) FOR MYSELF, SPOUSE, CHILD and my/our HEIRS, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation. I HEREBY RELEASE AND HOLD HARMLESS Marysville Youth Soccer Association, its directors, officers, officials, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
- 2) If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention of the nearest official immediately; and,

I acknowledge, affirm, and agree that I have had sufficient opportunity to read this entire WAIVER of my rights, that I understand its content, and that it is legally binding, and that I execute it freely, intelligently, and without duress of any kind and I agree to be bound by its terms.

_____ I also agree and consent to allow the MYSA to take photos/video of yourself, minor children, and/or those accompanying you at MYSA events for possible use in future publications, or advertising including, but not limited, to the MYSA websites. In signing this form I understand I am not entitled to any form of compensation.

All returned checks will be subject to all incurred bank fees and costs.

Please Initial if you agree: _____ I have received a copy and agree to accept and comply with the Parents Code of Conduct.

Please Initial if you agree: _____ If coaching, I have received a copy and I agree to accept and comply with the Coaches Code of Conduct.

Parent/Guardian Signature: _____ Date _____ Witness: _____

M.Y.S.A.M.I. - Soccer Uniform Order Form

Please indicate youth or adult when completing size information

(ie **Youth** Small, Medium Large X Large - or **Adult** Small, Medium, Large, X Large, XX Large)

Player's Name _____ Age _____ Division _____

Jersey Size Needed _____

Shorts Size Needed _____

Socks Size Needed _____

Parents Signature _____

Date _____

Email or Telephone number for uniform questions _____