

CLASSIC DIVISION PLAYER REGISTRATION FORM

ID#		
Player Last Name:	First Name:	MI:
Street Address:		Apt. #
City:	State:	Zip:
Phone:	Birth Date:	Gender/Age:
Mother's Name:		Day Phone:
Father's Name:		Day Phone:
Email address:		
Current Club/Team:	League:	Age/Div.

IMPORTANT (MUST READ)

I, the parent/guardian of the registrant, a minor, agree that the registrant and I will abide by the rules of the US Youth Soccer, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the US Youth Soccer accepting the registrant for its soccer programs and activities (the "Program"), I hereby release, discharge and/or otherwise indemnify the US Youth Soccer, its affiliated organization and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

TEAM/CLUB INFORMATION:

We, the parent/legal guardian and player listed above, have been given a copy of the Team/Club information for the team listed above. Parent/legal guardian and player have read and understand the information received from the Team/Club and what this means in way of commitment of time and money for the player and his/her family.

RELEASE FROM A CLASSIC DIVISION TEAM/CLUB:

We, the parent legal/guardian and player listed above, fully understand that a classic (select) player is obligated to his/her team/club for the soccer playing year (September 1 through August 31). Any release to transfer to another PA West Soccer Association classic division team is subject to classic division rules. An appeal is allowed under PA West Soccer rules and a request for an appeal is needed, in writing, to the classic division hearing and appeals committee. *Upon receipt of the appeal, the hearing and appeals committee shall request a written report from the player's current coach or manager. The hearing and appeals committee will schedule a hearing with all parties being invited to attend or respond, in writing.* Any appeal of the decision of the classic division hearing and appeals committee must be made directly to the Youth Board of PA West Soccer in accordance with their playing rules. A player may request a voluntary release and the team must grant such a request; however, the player is still considered previously rostered to that team and must go through the above procedure if he/she wishes to play for another classic division team during the same playing season. A player always has the right to play on a State ODP Team (a team or club cannot deny a player the right to participate on a State ODP Team).

We, the parent/legal guardian and player have read and understand the above and acknowledge that in signing below we acknowledge all information above set forth to be true and correct to the best of our knowledge, information and belief.

PRINT PARENT/LEGAL GUARDIAN NAME: _____

Parent/Legal Guardian Signature: _____

Date: _____

PRINT PLAYER'S NAME: _____

Player Signature: _____

Date: _____