

School: \_\_\_\_\_ Grade: \_\_\_\_\_ League: Rec/Travel (circle one) Coed/Girls (circle one)



## Mass Youth/US Youth Soccer MEMBERSHIP FORM



Affiliated with United States Soccer Federation (USSF) and Federation International de Football Association (FIFA)

### Amherst Youth Soccer Association



Player's Last Name		Player's First Name		
Mailing Address		City	State	Zip Code
Date of Birth	Male/Female	Height	Weight	# of Seasons Played
E-mail Address		Phone #		
Parent/Guardian		Parent/Guardian		
Person to notify in case of emergency		Phone #		
Doctor to notify in case of emergency		Phone #		
Medical Problems		Check here if you DO NOT want to receive commercial mailings <input type="checkbox"/>		

Abide by Rules and Release	Consent for Medical Treatment (Minor)
<p>I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the MYSA, the USYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the MYSA/USYSA accepting the registrant for its soccer programs and activities ("the programs"), I hereby release, discharge and/or otherwise indemnify the MYSA/USYSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claims by or on the 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.</p> <p>Signature: _____</p> <p>Name: _____ Date: _____</p>	<p>As parent or legal guardian of the above named player, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve life, limb, or well being of my dependent.</p> <p>Signature: _____</p> <p>Name: _____ Date: _____</p>

<b>Adult Volunteer (circle one):</b>	Coach	Assistant Coach	Administration
--------------------------------------	-------	-----------------	----------------