



Player
Registration
Please Print

PLAYER'S INFORMATION			
Last name:		First:	Middle:
Street address:		Home phone no.: ()	Cell phone no.: ()
City and State		Zip Code:	Date of Birth : (MM/DD/YYYY)
Have you ever lived outside of the USA? (yes/no)		Gender M/F:	School District:
PARENT/GUARDIAN INFORMATION -IMPORTANT: AT LEAST ONE PARENT'S COMPLETE INFORMATION IS REQUIRED BELOW			
Parent 1 Last name:		First:	Middle:
Street address:		Home phone no.: ()	Cell phone no.: ()
City and State		Zip Code	Email Address:
Parent 2 Last name:		First:	Middle:
Street address:		Home phone no.: ()	Cell phone no.: ()
City and State:		Zip Code:	Email Address:
IN CASE OF EMERGENCY			
Name of local friend or relative (not living at same address):		Relationship:	Home phone no.: ()
			Cell or Work phone ()
ACKNOWLEDGEMENT AND WAIVER			
<p>The above information is true to the best of my knowledge.</p> <p>I ACKNOWLEDGE, agree and represent that I understand the nature of recreational soccer activities and that my child is qualified, in good health, and in proper physical condition to participate in recreational soccer. I am fully aware of the hazards connected with this activity – including the risk of bodily injury – and elect to allow my child to participate as a voluntary participant in said activity and enter the premises of various fields and gyms used to conduct soccer play and training.</p> <p>I hereby waive, release and discharge and covenant not to sue BC United Soccer Association, a New York State nonprofit organization, its officers, board members, agents, coaches, volunteers, managers and contractors (collectively BC United), from any and all liability claims, demands, actions and causes of actions arising out of or related to any injury, including disability and death, that may be sustained by my child, or to any property belonging to my child, whether caused by the negligence of BC United or otherwise, while participating in soccer play, training and such athletic and related event activities, or while in, on or upon the premises where the activities are being conducted.</p>			
Parent/Guardian signature		Date	
Parent/Guardian signature		Date	