



# New Jersey Youth Soccer

## MEMBERSHIP FORM

League \_\_\_\_\_

Club \_\_\_\_\_ Team \_\_\_\_\_

Age U- \_\_\_\_\_ District # \_\_\_\_\_ League # \_\_\_\_\_ Club # \_\_\_\_\_ Team # \_\_\_\_\_

Circle one: Player      Player pass # \_\_\_\_\_

Coach      NJC ID # \_\_\_\_\_ Coach License Level \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Date of Birth (MM/DD/YYYY) \_\_\_\_\_ Circle one: Male      Female

Last 4 digits of Social Security # \_\_\_\_\_ (MUST BE FILLED IN)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

### IMPORTANT

I, the parent/guardian of the below named player, a minor, agree that I and the player will abide by the rules and regulations of the USYSA, its affiliated organizations including NJYS and its sponsors ("USYSA Parties"). In consideration of the player's participation in the soccer programs intending to be legally bound, hereby release and indemnify the USYSA Parties, the owners and operators of the facilities used for the Programs and their respective directors, officers, employees, agents, and representatives from and against all claims, liabilities, damages or causes of action arising out of or in connection with the player's participation in the Programs including, without limitation, player's transportation to/from any Program, which transportation is hereby authorized. I further grant the USYSA Parties the right to use the player's name, picture and/or likeness in printed, broadcast and other material concerning the Programs provided such use is related to the player's status as a participant in the Programs.

Name: \_\_\_\_\_ Player: \_\_\_\_\_  
Print Name of Parent/Guardian      Print Player Name

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_  
Signature of Parent/Legal Guardian      Signature of Player

Date: \_\_\_\_\_ Date: \_\_\_\_\_

**TYPE or PRINT LEGIBLY**