

Montgomery County Soccer Association (MCSA) Recreational League Registration Form *(Copy of Birth Certificate Required For All Players)*

Player Information

Player's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Date of Birth: _____ Gender: M F

E-mail: _____

Where does the player attend school, or what school is your child zoned for?

Last played for coach _____ (Coach's name)

If possible, do you want to play for this coach again? Y N

IF POSSIBLE, I'd like to practice in _____ area.

Medical Considerations (if any): _____

Parent or Legal Guardian Information

Parent/Guardian Name(s): _____

Work Phone Number: _____ Cell Phone: _____

Emergency Contact Information: _____

Consent and Release

I certify that to the best of my knowledge that I, or my child, is in good health and is capable of participating in the Montgomery County Soccer Association (MCSA) Recreational Soccer League. I, as the parent or guardian of the player listed on this form, hereby for myself, my heirs, executors, and assigns do waive and release any and all claims and rights for damages, liability, actions, and causes of actions whatsoever, arising out of or related to any loss, damages, or injury, including death, that may be sustained while participating in the MCSA Recreational League. I agree to indemnify and hold harmless MCSA and its officers and Board of Directors, referees, coaches, and all other volunteers from any and all legal action arising from my, or my, child's participation in the recreational soccer league. I, the undersigned, am dully aware of the risks and hazards inherent upon participating in said events. I hereby certify that I have read and understand this consent and release form.

Signed _____ Date _____
(Parent or legal guardian)

MCSA NEEDS YOUR HELP, PLEASE CHECK ONE:

COACH _____ ASST. COACH _____

MCSA use only: Birth Certificate: Payment: Age Group:

Jersey Purchased: YM: YL: AM: AL: AXL: Total #

Remarks: