SHREWSBURY YOUTH SOCCER
PLAYER REGISTRATION FORM

Current Grade: _____ **For Grade 1 and 2 (circle):** Mixed / Girls

First Name (*): _____ **Address:** _____

Last Name (*): _____ **City:** _____

Phone 1: _____ **State:** _____ **Zip:** _____

Phone 2: _____ **DOB:** _____ **Gender:** _____

***** Please make sure the first and last name match their birth certificate.

Father's Name: _____ **Mother's Name:** _____

Email: _____ **Email:** _____

Person to notify in emergency: _____

Emergency Contact Phone: _____

Medical issues and/or allergies: _____

Soccer Experience: New Player / One Season / Two+ Seasons **Club Player?** Yes / No

I'd Like to volunteer as: Coach / Asst. Coach / Team Parent / Field Setup / None

Nights unable to practice: Monday / Tuesday / Wednesday / Thursday / Friday

Uniform Order (if needed)

SHIRT: YM YL AS AM AL AXL

SHORTS: YM YL AS AM AL AXL

Youth Jersey: $25.00 **Adult Jersey:** $30.00
Youth Shorts: $15.00 **Adult Shorts:** $20.00

Fees

Pre-K and K:	$105.00
Grade 1 and 2:	$110.00
All other Leagues:	$135.00
Late Registration (**):	$ 25.00

Total: $_____

All Grade 3 and older players are required to wear the navy-blue SYS Adidas travel uniform.

** Late Fee applied for Pre-K, K, Grade 1 and 2 after July 18th
** Late Fee applied for All other Leagues after June 1st

REFUND POLICY
There are no refunds available after 8/1/2018 (exceptions specific to a pre-season injury, pre-season move, and/or a making of a high school soccer team). All refunds are subject to an $11.00 affiliation fee that Shrewsbury Youth Soccer pays to Mass Youth Soccer.

LIABILITY RELEASE AND AGREEMENT TO FOLLOW SYS RULES/GUIDELINES
I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the USYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the USYSA accepting the registrant for its soccer programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify the USYSA, its affiliated organizations 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 Program and/or being transported to or from the same, which transportation I hereby authorize. If any player or parent refuses to comply with the rules of SYS or USYSA and its affiliates, they are subject to suspension or expulsion from the SYS program.

CONSENT FOR MEDICAL TREATMENT (MINOR)
As the 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.

Signature of Parent/Guardian: _____ **Date:** _____