



This form should be submitted to your home team's Club.
This form must be retained by the club for at least five (5) years.

ADULT PLAYER REGISTRATION FORM

League Name _____

Club Name _____

Team Name _____

City _____

State _____

I hereby consent to the above-named club registering me with US Club Soccer. [Note: it will not be necessary to complete this form again as long as I am with the same club or team unless the information below changes].

Player's Signature

Date

PLAYER'S INFORMATION

Player's Name: _____

Birth Date: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Home Phone : () _____

Cell Phone: () _____

Other
Phone: () _____

Driver's License #: _____

State: _____

Email: _____

Please list any allergies or
other medical conditions:

In an emergency, please contact the following:

Name _____

Home Phone: () _____

Cell Phone: () _____

LIABILITY WAIVER, RELEASE, AND INDEMNIFICATION AGREEMENT

I recognize the possibility of physical injury associated with soccer, and voluntarily accept and assume this risk as part of my playing soccer for the above-named soccer organization.

I hereby release, discharge, and otherwise indemnify my club and team, US Club Soccer, their sponsors, the USSF and its affiliated organizations, the soccer facility, and the employees and associated personnel of these organizations, against any claim by or on my behalf, as a result of my participation in US Club Soccer programs and competitions.

I understand that my organization has chosen to cover me with optional secondary accident medical insurance, but the coverage is not effective until a roster with player information has been submitted to US Club Soccer, and the insurance premium has been paid. I understand I am also covered with the same liability insurance coverage afforded all other members of, and players and staff registered with, US Club Soccer.

Player's Signature _____ *Date* _____

NOTE: Any youth players (U-19 or younger) competing on an adult team must submit proof of birth and parent/legal guardian signature on this form.

I, _____ [print name] give my approval for the youth player named on this form to compete on an adult team.

Parent's Signature (if necessary) _____ *Date* _____