



CLUB REGISTRATION FORM

PLAYER INFORMATION			Team / Age Group
Player Last Name	Player First Name		Male / Female
Premier Club (if you also play on a premier team)	Birth date	Grade in School (2011-2012)	Uniform Size (shirt & shorts)

Note: All players (new and previous) should select uniform size. Thank you.

PARENT / GUARDIAN CONTACT INFORMATION	
Mother's Name:	Father's Name:
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
Email Address:	Email Address:

EMERGENCY CONTACT INFORMATION	
Emergency Contact:	Phone:
Emergency Contact Relationship to Player:	

VOLUNTEERING: Twinsburg AC Soccer is a volunteer organization. Please consider donating your time or talent to one or more of the activities below by placing a check (✓) by activities that interest you: *Thank you!*

- | | |
|---|---|
| <input type="checkbox"/> Coaching (Indicate Head or Asst) | <input type="checkbox"/> Team Manager |
| <input type="checkbox"/> Field Set-up / Tear-down | <input type="checkbox"/> Spirit Wear |
| <input type="checkbox"/> Picture Day | <input type="checkbox"/> Banquet / Awards Assembly |
| <input type="checkbox"/> Registration | <input type="checkbox"/> Administrative / Clerical asst |

I WISH TO RECEIVE THE OYSAN NEWSLETTER (STATE SOCCER ASSOCIATION)	YES	NO
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IMPORTANT – PLEASE READ & SIGN BELOW

I, parent/legal guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the Twinsburg Athletic Club Soccer Assoc. (Twinsburg AC) and the affiliated leagues and organizations. Recognizing the possibility of physical injury associated with soccer, and for Twinsburg AC and the associated travel league(s) accepting the registrant for its soccer programs and activities, I hereby release, discharge and/or otherwise indemnify the City of Twinsburg, the Twinsburg City Schools, Twinsburg AC, the associated leagues, the Ohio Youth Soccer Association-North, their employees and associated personnel, including the owners of the fields and facilities utilized by Twinsburg AC, and any affiliated sponsors, against claim by or on behalf of the registrant as a result of the registrants participation with Twinsburg AC and/or being transported to or from same, which transportation I hereby authorize.

My signature gives my permission for images of myself/my child to be used by Twinsburg AC Soccer for newspapers, grant proposals, official web sites, etc. I may rescind my permission at any time. No compensation will be given.

I have read the "Sportsmanship Declaration" and "Parents Code of Ethics" and agree to abide by them completely.

Signature of Parent/Guardian _____ Date _____