



Division _____
 Team No. _____
 Coach _____

Palmdale Youth Soccer League (PYSL)
 Year Season 20____ - 20____
YOUTH PLAYER REGISTRATION

Parent / Guardian Information			
First Name	MI	Last Name	Relation
Street Address			
City		State	Zip
Home Phone	Work Phone	Cell Phone	
Email address			
Parental/Volunteer Support: <input type="checkbox"/> Coach <input type="checkbox"/> Manager <input type="checkbox"/> Referee <input type="checkbox"/> Board <input type="checkbox"/> Fields <input type="checkbox"/> Publicity <input type="checkbox"/> Fundraising			

Player Information				
<input type="checkbox"/> New Player <input type="checkbox"/> Returning Player		If Returning, Division Played: _____		
First Name	MI	Last Name	Gender	M – Male F – Female
Birth Date (MM/DD/YYYY)	School Name		Grade	
Shirt Size	Shorts Size		Note: Place a Y or A in-front of Size Y – Youth Size or A – Adult Size	
Emergency Contact	Relation to Player		Phone	
If Applicable, list any medical problem(s) physical Limitation(s) player has:				

We, the registrant and the registrant's legal parent or guardian, hereby agree and acknowledge the following: **(1)** We acknowledge to have received a copy of PYSL's Bylaws and rules of competition **(2)** We agree to abide by the rules of Palmdale Youth Soccer League (PYSL). **(3)** We recognize the inherent risk of serious or permanent physical injury and possible death associated with youth soccer activities and games. In consideration for PYSL accepting the youth player's registration and participation in its sanctioned youth soccer leagues and tournaments ("Youth Programs"), we hereby release, discharge and/or otherwise indemne registrant's participation its volunteers and associated personnel, including the owners of fields and facilities utilized for the Youth Programs, against any claim, lawsuit or written demand, including but not limited to any claims for personal or physical injury or death, by or on behalf of the registrant as a result of the registrant's participation in the Youth Programs and/or being transported to or from the same, which transportation we hereby authorize. **(4)** We authorize verification of the registrant's date of birth from legal records to be provided to a PYSL authorized representative for the limited purpose of verifying the player's age and identity. **(5)** We consent to PYSL taking photographs, video recordings, and/or sound recordings in documenting the activities of PYSL's programs and services. We hereby grant PYSL permission to use the negatives, prints, motion pictures, video/audio tapings, or any other reproduction of the same for PYSL and its affiliates' educational and promotional purposes in manuals, on flyers, the internet, or other publications. We have read this release and waiver of liability and fully understand its terms. We understand that we waive substantial rights by signing this form. We agree to waive all such rights above including understand it's terms and the right to file a legal action or assert a claim for personal or physical injury or death of any kind. We sign this release form freely of our own free will.

Signature of Parent/Legal Guardian _____ Date _____

League Use Only		
Date Received	Verified Birth Certificate	Board Member
Payment Received: Cash/Zelle _____	Check# _____	Credit Card Approval# _____