



CORONA-RIVERSIDE YOUTH SOCCER LEAGUE

TEAM NAME PLAYER REGISTRATION APPLICATION

	PLAYER ID#
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PLAYER INFORMATION CATEGORY

FIRST NAME _____ MI _____	LAST NAME _____
<input type="checkbox"/> B-BOY <input type="checkbox"/> G-GIRL	DATE OF BIRTH _____ / _____ / _____
If you have medical insurance? YES <input type="checkbox"/> NO <input type="checkbox"/> please mention _____	_____ FT. _____ IN. _____ WEIGHT

PICTURE	STREET ADDRESS _____	CITY _____	ZIP CODE _____
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SCHOOL NAME _____	GRADE _____
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EMERGENCY CONTACT #1 _____	PHONE # _____
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EMERGENCY CONTACT #2 _____	PHONE # _____
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LIST ANY MEDICAL PROBLEM(S) / PHYSICAL LIMITATION(S) PLAYER HAS:

PARENTS INFORMATION

FATHER NAME _____	PHONE _____
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MOTHER NAME _____	PHONE _____
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IMPORTANT.- I We be the parent guardian of the above named player, a minor. And the above name player agree to the following

(1).-To abide by the rules of C-R YSL its affiliated aorganizations and sponsor. Recognizing the possibility of physical injury associated with soccer and in consideration for C-R YSL accepting the registrant for its soccer programs and activities. I hereby release, discharge and/or atherwise indemnify, its affiliated organizations and sponsors, their employees and associated personnel, icluding he owners of fields and facilities utilized for the programs, against any claim by or behalf of the registrant as a results of the registrant participation in the programs and/or being trasported to or from the same, which transportation I hereby authorize.

(2).- To authorize my child.s school to verify the date of birth of my child from school records to a C-R YSL authorized representative for the limited purpose of player age verification.(3).- To hereby give my consent for emergency medical care prescribe by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be give under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.(4).-To hereby give my consent to C-R YSL to take photographs, videos recordings and/or sound recordings of the above names player in documenting the activities of Corona-Riverside Youth Soccer League programs. I grant C-R YSL Permission tous the negatives, prints, motions pictures, video/ audio tapings, or any other reproduction of the same for educational and promotional purpose in manuals, on flyers, on the world wideweb, or in other publications.

SIGNATURE OF PARENT/GUARDIAN	DATE
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