



# BLAINE SOCCER CLUB

## 2009 Fall Traveling Registration Form

(REGISTRATION DEADLINE – JULY 24<sup>TH</sup> 2009)  
**Fee \$95.00 (plus uniform cost if needed)**

Name: \_\_\_\_\_  
First Middle Last

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Did you play travel soccer for Blaine SC in the summer of 2009? Yes    No

(If yes) Coach Name/ Age Group: \_\_\_\_\_ Gender: Boys or Girls

If player played for another Club - Club/Age Group/ Level (e.g. C1) \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### **PARENT/GUARDIAN AGREEMENT**

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the USYSA and MYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the USYSA and MYSA accepting the registrant for its soccer programs and activities (the "Programs"). I hereby release, discharge and/or otherwise indemnify the USYSA and MYSA, it's 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 Programs and/or being transported to or from the same, which transportation I hereby authorize.

Parent/Legal Guardian: \_\_\_\_\_  
Print

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please Note – Summer 2009 BSC Travel Players will be given first preference to play on their same team again for fall. New players will only be added if openings become available. New players will also need to purchase a travel uniform (additional charge).**

CHECK NUMBER _____	CASH AMOUNT _____
CHECK AMOUNT _____	REC'D BY: _____
BIRTH CERTIFICATE ON FILE: _____	DATE REC'D: _____