

NEXT LEVEL SOCCER ACADEMY REGISTRATION FORM

CHILD REGISTERING IS: Male ___ Female ___

PLAYED ORGANIZED SOCCER? Yes ___ No ___

If "Yes" what club/organization? _____

GRADE FOR SPRING 2010: ___ T-shirt size _____

CHILD INFORMATION:

NAME: _____

STREET: _____

CITY: _____ ST: ___ ZIP: _____

BIRTHDATE: ___/___/___

PARENT INFORMATION:

FATHER'S LAST NAME: _____ FIRST NAME: _____

PHONE: (____) _____ EMAIL: _____

MOTHER'S LAST NAME: _____ FIRST NAME: _____

PHONE: (____) _____ EMAIL: _____

EMERGENCY CONTACT:

Name: _____ Phone: (____) _____

Relationship to the Child: _____

CONSENT, RELEASE, and PROXY:

I consent to my child's participation in the Next Level Soccer Academy program, training, practices, games and related events. I, individually and on behalf of my child, do hereby release and forever discharge the NLSA, its officers, members, coaches, directors, agents and representatives from any liability for personal injury, loss or other damages which may be sustained in connection with our association or with participation in the NLSA soccer program.

I agree to hold the NLSA harmless and indemnify it for any damages for which it becomes liable as a result of said injuries. I understand that personal injuries can occur before, during, and after soccer games or practices by reason of field preparation and conditions, equipment conditions, and contact with participants, NLSA personnel and spectators. This release shall apply to any personal injury or other loss whether or not reasonably anticipated, expected or contemplated at this time. I have read and understand the foregoing.

PARENT SIGNATURE: _____ DATE: _____