Missouri Youth Soccer Association

MEMBERSHIP FORM

You must complete a separate form per team participating with

TEAM NAME _____ **AGE/DIV** _____

Level of Play: _____**Competitive** ____ **Secondary** _____ **Recreational**

If this is Secondary team dual roster for must be submitted with this paperwork and list name of the primary team _____

Enter data for player/coach/administrator below. Name must be filled in as it appears on the player's state birth certificate.

ID #	
First Name	
Middle Initial	
Last Name	
Address	
City	
State	
Zip	
Phone	(_____)
Birth date	**Month** _____ **Date** _____ **Year** _____
Email address	

ID# for players is the number on their state birth certificate. All players must submit a copy of their state birth certificate. ID# for coaches is their coaches license number. All coaches will be required to submit the copy of their coaches license ~~**and a copy of the confirmation page of the kidsafe disclosure statement. All team managers must submit a copy of the confirmation page of the kidsafe disclosure statement. This form must be done online at mysa.org.**~~

Father's Name _____ **Cell Phone** _____ **Work Phone** _____

Mother's Name _____ **Cell Phone** _____ **Work Phone** _____

List any medical problem or prohibition player has _____

PARENT SUPPORT

Emergency Contact Person (other than parents) Name _____

__ **Head Coach**

Relationship _____ **Phone (H)**_____**Phone (W)**_____

__ **Assistant Coach**

- **School Attending** _____ **Grade** _____

__ **Team Parent**

- **Have you ever lived in a foreign country?** _____ **If yes, when did you enter/re-enter the United States?** _____

(Any player U14 and older that answers yes or has a foreign birth certificate, must fill out the US Soccer International Clearance Request Waiver and submit to US Soccer before player can be rostered to team.)

LIABILITY RELEASE

MUST be signed by parent or legal guardian of player. Coaches must sign when completing form on self.

I, the parent or legal guardian of the above registered player, a minor, agree that I and the player will abide by the rules and regulations of the USYSA, its affiliated organizations, and sponsors ("USYSA Parties"). In consideration of the player's participation in the soccer Programs and activities of the USYSA Parties (the Programs), I, for myself and the player and our respective heirs, administrators and successors, intending to be legally bound, hereby release and indemnify the USYSA Parties, the owners and operators of the facilities used for the Programs, and their respective directors, officers, employees, agents and representatives from and against all claims, liabilities, damages or causes of action arising out of or in connection with the player's participation in the Programs including, without limitation, player's transportation to/from any program, which transportation is hereby authorized. I future grant the USYSA Parties the right to use the Player's name, picture and/or likeness in printed, broadcast and other material concerning the Programs provided such use is related to the player's status as a participant in the Program.

SIGNATURE _____ **DATE** _____