**ADULT LEAGUE REGISTRATION FORM**

**Team or Individual Player Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Team Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Team name should not be offensive in nature)

**Team Manager Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If applicable)

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

**Eve Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Day Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**League Season:**

☐ **Adult League Starting 2-21-2014**

☐ **Adult League 8v8 Starting TBD**

☐ **Adult Co-Ed League Starting TBD**

**Team Fees:**

**Friday 11 v 11 (Open) Men’s League:**  Maximum of 22 players per team. Each team is guaranteed eight (8) regular season games with a (2) game playoff system (potential for 9 games). Cost is $1050 per team. All player additions (once roster is submitted) will be $65 dollars per player. A $50 red card fee will be assessed to any and all red cards issued; no exceptions. **\*\*Player passes are your government issued ID cards (i.e. drivers license, passport, etc.) The names on the roster must reflect the name on the ID. If it does not, that player will not play until the correction to the roster is made. Every correction is $35 each.**

**Team Roster Registration Form**

11 V 11 (Open)

|  |  |  |  |
| --- | --- | --- | --- |
| **Player Name** | **Player Pass ID#** | **☐Male** | **☐Female** |
|  |  | ☐Male | ☐Female |
|  |  | ☐Male | ☐Female |
|  |  | ☐Male | ☐Female |
|  |  | ☐Male | ☐Female |
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|  |  | ☐Male | ☐Female |
|  |  | ☐Male | ☐Female |

**Team Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Team ID# (office use only):\_\_\_\_\_\_**

Player Registration and Release of Liability forms must be on file prior to first game.

|  |
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| **OFFICIAL USE ONLY**  Date Received:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pass Numbers Issued:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Player Registration and Release of Liability forms received? Yes/No |

**Release of Liability**

I hereby certify that I am over the age of eighteen and understand the nature and scope of the risks and dangers associated with playing the game of soccer. I understand that it is not the function of the United States Soccer Federation (USSF) and its affiliates, Modesto Youth Soccer Association (MYSA) & Ajax United Football Club to guarantee the safety of participants in the game. I further understand that each individual participant bears full responsibility to exercise due care in the performance of this activity for the safety of him/herself and other participants.

IN CONSIDERATION of being permitted to play, I hereby RELEASE AND HOLD HARMLESS USSF, MYSA-Ajax, the City of Modesto, their affiliates, employees, contracted agents, operators, instructors and volunteers of and from any and all claims, demands, costs, charges and expenses for any harm, injury, damage or loss of property which may be sustained by me as a result of or relating to my participation in the game of soccer.

I HAVE READ AND UNDERSTAND THE FOREGOING DISCLAIMER, AND ALL CLUB AND LEAGUE RULES AND REGULATIONS AND RELEASE AND RECOGNIZE THAT, BY MY SIGNATURE HERETO, I AM GIVING UP CERTAIN SUBSTANTIAL RIGHTS. I KNOWINGLY ASSUME THE RISK ASSOCIATED WITH MY PARTICIPATION IN THE ADULT LEAGUE SOCCER PROGRAM.

I hereby further certify that the information set forth below is true and accurate. *(If Player is* ***under*** *18 years of age (but at least 16), this contract* ***must*** *be signed by a parent or legal guardian.)*

\_\_\_\_\_\_

Player Signature Date

PLAYER NAME:

ADDRESS:

CITY: STATE: ZIP:

Driver’s License # Date of Birth:

Home #( ) Work #( ) E-mail:

Team Assignment: Division:

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

*FOR OFFICE USE ONLY-DO NOT WRITE IN THE SPACE BELOW*

Player:

**COPY OF PHOTO I.D. HERE**

Season: STAPLE PHOTO

Team:

Division:

Authorized Signature for MYSA-Ajax

**Team Registration Payment Form**

**\*\*ATTENTION\*\***

**\*\*PAYMENTS WILL BE PROCESSED DURING THE REGISTRATION PROCESS\*\***

Team or Individual Player Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Team name should not be offensive in nature)

Team Manager Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If applicable)

Fee Amount Enclosed $\_\_\_\_\_\_\_\_\_\_\_\_

Payment Method ☐Check-Make check payable to MYSA ☐Credit Card

☐Amex ☐ MasterCard ☐Visa

Name on Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Holder Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Player Release of Liability Forms Must Accompany Registration Forms**

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| **For Office Use Only:**  Date Received:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Payment Received $\_\_\_\_\_\_\_\_  Red Card Bond Received (Team Only): Yes/No |