Yadkin Soccer Association Player Information Sheet



First Name	M. Initial	Last Name	Birthday
Parents / Legal Guardians			Email Address
			/
Parents / Legal Guardians			Home Phone / Cell Phone
			/
District Player Attends Schoo		Emergency Contact	Em. Contact Home Phone / Cell Phone

Medical Condition(s) to be made aware of

Insurance - is required for all players and is included in the YSA fees. This insurance is provided by NCYSA and is intended as a secondary medical insurance and takes over payment after your regular insurance has paid, or if you do not have any insurance. There is a deductible, which you must pay. This insurance is not in force until the sport fee is paid, so no player may participate in any activity until the sport fee is paid. This is not major medical coverage; it is limited in its benefits.

MEDICAL CONSENT, WAIVER, RELEASE AND INDEMNITY. The undersigned parents/legal guardians of the above-named minor child ("Child") authorize our Child to participate in all soccer-related programs and activities ("Activities") of the North Carolina Youth Soccer Association and Yadkin Soccer Association (together, "NCYSA/YSA") and the affiliated team to which our Child is assigned ("Team"). On behalf of ourselves, our Child and our respective heirs and representatives, we:

1. Acknowledge that participation in Activities involves risks of permanent, serious or other injury or disability which may result from the acts and/or omissions of the Child, the undersigned or others, or a combination thereof; 2. Understand that the rules and regulations of the United States Youth Soccer Association ("USYSA") and the NCYSA/YSA are intended for the safety and protection of participants in Activities and agree to abide thereby, understand participation in Activities requires a minimum level of physical fitness, and confirm that our Child is physically fit. 3. Release, discharge, waive and absolve, and agree to indemnify and hold harmless, the USYSA, the NCYSA/YSA and their respective local associations, clubs, leagues, officers, directors, employees, agents, referees, coaches and supervisors, the owners/lessees of any site of Activities, the persons specified in item 4. below, and any person transporting our Child from or to Activities from any and all claims, actions, liabilities, demands and costs arising from or relating to the Activities or our Child's participation therein; and 4. Authorize the designated coach and/or assistant coach of the Team (if such persons are unable to contact an undersigned with reasonable effort or are persuaded by medical advice that there is not time for such an effort) to consent to any medical, dental or surgical diagnosis or treatment and/or hospital or clinical care to be rendered to our Child under the supervision and advice of any duly licensed physician (including a dentist or orthodontist).

This authorization shall remain in effect until the end of the above designated sport unless sooner revoked in writing to the Coach.

Liability Release - We understand that Yadkin Soccer Association is a volunteer organization and we the parents do hereby give our approval to our child's participation in any and all activities. We understand the nature of the insurance coverage provided, however, we assume all additional responsibility for hazards incurred in the conduct of activities, transportation to and from activities, and we do further hereby release, absolve, indemnify, and hold harmless, Yadkin Soccer Association, any affiliated organization or district, and those associated with YSA or its affiliate organizations (Board Members, Coaches, Officers, Officials, Organizers, Referees, Sponsors, Assistants, and Land Owners who have permitted use of their facilities), any and all of them. In case of injury to our child, we waive all claims against Yadkin Soccer Association and/or any affiliated organization or those associated with it. We agree to abide by the rules and By-Laws of Yadkin Soccer Association and also agree to take no legal action against the organization or those associated with it concerning any rule. I certify that I have read, understand and agree to the items listed above and have accepted this consent / release form by acknowledging the check box on this form.

Uniform Needed? UNIFORM COST IS \$18 PER SE	Uniform Needed?	UNIFORM CO	ST IS \$18 I	PER SET
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YES NO

If uniform is needed, please circle size. Jersey, Shorts, and Socks comprise the uniform kit

YXS	YS	YM	YL	AS	AM	AL	AXL	AXXL
	Recreation Fee	\$70		(circle one)		Check	#	
	Uniform Cost					Cash		
	Total Due							