

MUSTANG UNITED FC

2021-2022 Player Profile Form

Please complete and return to your coach once you have made a commitment to play for MUFC

Player Name _____ Birth Year _____

Parent/Guardian Name(s) _____

Home Address _____ City _____ Zip _____

Phone Number(s) _____

Email address: _____

Uniform Information: Uniforms will be ordered and paid for online by the parent/guardian through Soccer Master. Uniform includes (home/away jersey and socks, shorts, and practice jersey.)

***Optional- There will be an option items to purchase warm up pants/jacket, and bag)

Required documents:

_____ Copy of Birth Certificate (only if new to Mustang United FC)

_____ Color photo for player card (1in by 1in color photo)

_____ Medical Release Form

FINANCIAL DISCLAIMER: I understand of the financial agreement of payment and due dates.

Payment includes the following: Fall & spring Heartland league dues, indoor league dues, player card, administrative/coaching dues, and lastly one fall & one spring local tournament. Payment: by check to Mustang United FC; Venmo @MustangUnitedFC **** Be sure to put your child's name & birth year in the memo.**

Payment Schedule is:

___ June 15 - \$350

___ July 15 - \$350

___ October 15 - \$350

___ January 15- \$350

___ High School Players - Total is \$850 - (\$425 due on June 15 and \$425 due on Sept. 15)

Parent/Guardian Signature: _____ Date _____

RELEASE AND WAIVER OF LIABILITY: I hereby release Mustang United FC and coaches/staff from any and all liability for injuries, illness, or loss of property that may incur during the 2021-2022 Mustang United FC season. I further acknowledge that I agree to provide health insurance for my minor child and will be responsible for any and all medical and related bills that may be incurred by me for any illness or injury that my child may sustain during the 2021-2022. Mustang United FC season and while traveling to and from practices, games, and team functions.

I acknowledge that I have read this RELEASE AND WAIVER OF LIABILITY in its entirety and fully understand the contents. I am aware that this Release contains an acknowledgement of my voluntary and knowing assumption of the risk of illness or injury. I further acknowledge that I have signed this release and waiver voluntarily and of my own free will.

Parent/Guardian Signature: _____ Date _____

****All returning MUFC families, please return this form, the medical release form, player photo, and June soccer dues to your current coach by June 15, 2021.**

****New MUFC families – please return this form, copy of your birth certificate, the medical release form, player photo, and June soccer dues to your coach by June 15.**