

# Plains Soccer Association / EPYSA 2017 Participant Registration Form \$30.00 Under 6 / \$45.00 U-7 – U-18

Players Name: \_\_\_\_\_ Birth Certificate  
Supplied \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Male or Female: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip  
Code: \_\_\_\_\_

Parent(s) / Guardian(s) Name(s):  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work or Cell Phone:  
\_\_\_\_\_

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

Uniform Size Jersey: YXS(4/5) YS(5/6) YM(7/8) YL(10/12) AS(36"/38") AM(38"/40") AL(40"/42")  
AXL(44"/46")

Shorts: YXS(18/20") YS(20/22") YM(22/24") YL(24/26") AS(28/30") AM(32/34") AL(36/38") AXL(40/42")

Socks: Small Regular King

**REGISTRATIONS RECEIVED BETWEEN APRIL 24, 2017 AND JULY 1, 2017 WILL BE SUBJECT TO  
A \$15 PER FAMILY LATE FEE. ABSOLUTELY NO REGISTRATIONS WILL BE ACCEPTED AFTER  
JULY 1, 2017. All fees are due at the time of registration, no registrations will be accepted without  
proper payment.**

**ANY RETURNED CHECKS ARE SUBJECT TO A \$25 SERVICE CHARGE**

**Fund Raiser Commitment** As a condition of registration with  
Plains Soccer Association, participation in the club fund raiser is mandatory (one fund raiser per family). You  
may choose the buyout option of paying a \$24 donation at the time of registration, or you may choose to sell  
one full box of Gertrude Hawk candy (48 bars @ \$1 per bar) at the start of the season. This is the only fund  
raiser that is required by Plains Soccer. Please choose your fund raiser option:

\_\_\_\_\_ **I will make a donation of \$24 (per family) at registration.**

\_\_\_\_\_ **I agree to sell one box of fund raiser candy (distributed at pictures) and  
return the**

**money (\$48) to my child's coach on or before September 19, 2017. The candy is  
given to the youngest sibling of the family. Please print child's name:**

\_\_\_\_\_.

\_\_\_\_\_ **Travel Soccer Participant Travel Soccer Organization**

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Release Statement I, the parent /guardian of the registrant, a minor, or adult registrant of legal age, agree that I and the registrant will abide by the rules of EPYSA, and its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the EPYSA accepting the registrant for its soccer programs and activities ("the Programs"), I hereby release, discharge and/or otherwise indemnify the EPYSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of registrant's participation in the Program, and/or being transported to or from the same which transportation I hereby authorize.

Parent/Guardian or Adult Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
"Our GOAL is to have FUN playing soccer."