

2011-2012



ADULT PLAYER REGISTRATION AND INSURANCE WAIVER

Team Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

I hereby consent and permit Amateur Soccer Association Idaho to register me with US Club Soccer.

Player's Signature \_\_\_\_\_ Date \_\_\_\_\_

PLAYER'S INFORMATION

Player's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

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

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone : \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Bus Phone: \_\_\_\_\_

In an emergency, please contact the following:

Name \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

LIABILITY WAIVER, RELEASE, AND INDEMNIFICATION AGREEMENT

I recognize the possibility of physical injury associated with soccer, and voluntarily accept and assume this risk as part of my playing soccer for the above-named soccer organization.

I hereby release, discharge, and otherwise indemnify my team, Boise Soccer League, Amateur Soccer Association Idaho, US Club Soccer, their sponsors, the USSF and its affiliated organizations, the soccer facility, and the employees and associated personnel of these organizations, against any claim by or on my behalf, as a result of my participation in US Club Soccer programs and competitions.

I understand that my organization has chosen to cover me with optional secondary accident medical insurance, but the coverage is not effective until a medical release with player information has been submitted to US Club Soccer, and the insurance premium has been paid. I understand I am also covered with the same liability insurance coverage afforded all other members of, and players and staff registered with, US Club Soccer.

Player's Signature \_\_\_\_\_ Date \_\_\_\_\_

OFFICIAL USE ONLY

US Club Player Pass: Fee \_\_\_\_\_ of \_\_\_\_\_ ID \_\_\_\_\_ Confirmed \_\_\_\_\_ Issued \_\_\_\_\_

Photo \_\_\_\_\_ Form Uploaded \_\_\_\_\_ New Player YES / NO \_\_\_\_\_ Registration Number \_\_\_\_\_

ASAI Player Fee : Fall \_\_\_\_\_ Spring \_\_\_\_\_