For MYSO Use Only:
Division:
Paid \$
Check #

Meridian Youth Soccer Organization Player Registration Form 2014-2015

4820A Poplar Springs Drive PMB #150 Meridian MS 39305

Register Online at www.MeridianSoccer.com

New players must submit a birth certificate with registration form.

		s Fall & Spring Seasons	*Player's Name as on Birth Certificate*									
	Aug. 1, 201	rth Date Reg. Fee 0 to July 31, 2011 \$80 9 to July 31, 2010 \$80	Player First Name *									
Under 6 Under 7	Aug. 1, 200 Aug. 1, 200	8 to July 31, 2009 \$80 7 to July 31, 2008 \$100	Middle Initial *									
Under 10	Aug. 1, 200	6 to July 31, 2007 \$100 4 to July 31, 2006 \$100 2 to July 31, 2004 \$100	Last Name *									
	0 /	5 to July 31, 2002 \$50	Street Address									
HS Division	n - Fall Onl	y / Boys & Girls / 7v7 format	City/State/Zip Code									
Description		Amount	Birth Date									
Enter Registration Fee Here			Gender (Circle One)	Male / Female								
			Email Address									
\$25 Late Fee if After 08/30			School									
-\$10 Sibling Discount – Print Name of Full Price Sibling Here		-\$10	Health Concerns and/or Medications									
\$300 to Sponsor a '(Please include sponsor			https://allstartees	s must order a uniform from andtrophies.itemorder.com/								
Scholarship Fur Any Amount is Appr			(Sale Code: MYSO2014) immediately after registration. Deadline to order is Monday, September 1 st . Failure to order your uniform in a timely manner will result in your child not being able to									
Total Paymen	ıt	NO REFUNDS		they have the appropriate uniform.								
For game update	es and free	training opportunities visit www.Me	r <u>idianSoccer.com</u> and facebook <u>hi</u>	ttps://www.facebook.com/MeridianYSO								
		FAMILY	INFORMATION									
ther:			Mother:									
one #:			Phone #:									
nail:			Email:									
hone #: mail: Will you coac teach ev		m? Yes or No (Please Cir u need to know and provide you with lesso	Email: cle One) No experience required. V	We have a great Director of Coaching that wil re subject to a background check.								

CONSENT TO PLAY AND MEDICAL RELEASE

Recognizing the possibility of physical injury associated with soccer and in consideration for the MYSO/MSA and its affiliates accepting the registrant for its soccer programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify the MYSO/MSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of the fields and facilities utilized for the Programs against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize. I hereby give my consent to have an athletic trainer and/or Doctor of Medicine or dentistry provide my son/daughter with medical assistance and/or treatment and agree to be responsible financially for the reasonable cost of such assistance and/or treatment. To Parents/Guardians/Players: Registration with MYSO is a binding agreement that will require participation by the player for the full seasonal year to the team to which they are assigned. By signing this form, I/we agree to participate for the full seasonal year on the team to which I/we are assigned unless properly released or transferred from my assigned team. I/we also agree to pay any fines which may be assessed to MYSO as a result of my/our inappropriate or unsportsmanlike behavior at sanctioned MSA/MYSO events. I agree to allow the use of my child's photo(s) on the MYSO/AFC website www.meridiansoccer.com and/or other MYSO/AFC publications.

Signa	Signature of Parent/Guardian												Da	te		
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