

Central Vancouver SC and Westside SC Select

BRING THIS FORM TO THE TRYOUT

PLAYER # _____

club will assign number at tryout site

Name: _____

Address: _____

City/State/Zip: _____

Birthday: _____

Home Phone: _____

e-mail address: _____

Club & team name of last year's team? _____

Come to the tryouts prepared:

- Dress appropriately for the weather - shinguards are mandatory
- Bring water
- Bring a ball clearly marked with your name
- Arrive early - turn in paper work and receive a tryout number

PARENT or GUARDIAN AUTHORIZATION and WAIVER of LIABILITY

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the *USYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the USYSA accepting the registrant for its soccer programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify the USYSA, 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 the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

Signature _____

Parent or Legal Guardian

Date _____

**United States Youth Soccer Association*