

EAST WINDSOR PAL TRAVEL SOCCER CLUB



2008-2009 TRAVEL SOCCER REGISTRATION Registration Fee - \$85.00 plus Facility Improvement fee

Team: _____

Player's Last Name: _____ First Name: _____

DOB: _____ Age: _____ PHONE: _____

Address: _____ City: _____ ZIP: _____

Parent/Guardian Names: _____ Name _____

Home Phone: _____ Cell Phone: _____

Parent's E-Mail address: _____

MEDICAL CONDITION:

Does player have any medical or other condition that would preclude or restrict his or her ability to participate in this program? Yes? () No? () If yes, explain: _____

EMERGENCY DATA: If we can not reach you, whom should we call?

NAME: _____ NUMBER: _____ Relationship to player: _____

Mandatory Facility Improvement Fee: Assessed as one fee, per sport, per family, per season.

_____ I have included the \$25 buy-out fee in my registration fee.

_____ I have enclosed \$50.00. I will be notified to pick up candy or a similar item to sell to re-coup my fee.

PARENT OR GUARDIAN AUTHORIZATION:

Parent's Name: _____ Parent's Phone: _____

I attest that all information provided above is true and accurate to the best of my knowledge.

I agree to abide by all rules & regulations of the PAL. The medical history provided is correct and complete to the best of my knowledge, information and belief, and I give my permission for the player named above to fully participate in all normal activities associated with PAL Travel Soccer programs except those specifically noted on this form. In the event an emergency, accident, or injury occurs while this person is participating in or traveling to or from a PAL Travel Soccer competition or practice and I am not present, **I hereby give permission** for the adult representative of the PAL to secure whatever medical and hospital care is necessary, and **I agree** to be financially responsible for such care and treatment. **I further agree** to hold the PAL, and its representatives, organizers, & sponsors free from all personal liability in connection with any such emergency, accident or injury.

I will protect and return all PAL property entrusted to my care. I will assist the PAL and PAL Travel Soccer by participating, to the best of my ability, in any authorized activities required by the rules and regulations of the program and participate in any required East Windsor PAL Travel Soccer sponsored tournament or fundraising activities.

Support of the East Windsor Blast-Off Tournament is mandatory or a fee of \$75.00 will be assessed.

I understand that my signature below commits the above named player to the East Windsor PAL Travel Soccer team for the 2008-2009 Soccer season and that I will be held responsible for all team fees and fundraiser quotas

I pledge to act in a sporting manner at all times and to support my player, coach, team, and game officials. I understand that my child and I may be suspended from Travel Soccer activities if I act in a violent, profane, or unruly manner during practices or games. An administrative hearing held by the Travel Soccer Executive Committee or the East Windsor PAL Discipline Committee will precede this possible suspension. **I will abide** by their decision.

SIGNED: _____ DATE: _____ PHONE: _____

Parent or Legal Guardian