



MID-COLUMBIA WOMEN'S SOCCER LEAGUE

Summer 2011 – Tuesdays @ 6:00PM, 7/12 thru 8/16/2011

Visit www.stmaryshoodriver.com > soccer page
or contact Sue Farro at suzyfox@live.com for more info

All players **MUST PRE-REGISTER** by filling in the form below and mailing or bringing it to:
BY MAIL: Mid-Columbia Women's Soccer, c/o Patty Romero, P.O. Box 693, Hood River, OR 97031
DROP-OFF: Patty Romero, St Mary's Church, 1501 Belmont Ave, Hood River, OR 97031

PLAYER'S NAME (print clearly): _____

MAILING ADDRESS: _____

EMAIL: _____ (or write "TEXT" if you prefer that)

PHONE: _____ ALTERNATE PHONE: _____

EMERGENCY CONTACT NAME: _____ PHONE: _____

BIRTHDATE: ____/____/____ AGE: ____ (freshman in high school or older)

PREVIOUS SOCCER EXPERIENCE: _____

TEAMMATE REQUEST: _____

MEDICAL CONDITIONS/ALLERGIES: _____

If under 18:

NAME(S) OF PARENT(S)/GUARDIAN(S): _____

PHONE NUMBER OF PARENT/GUARDIAN: _____

NEW PLAYER FEE IS \$36 (for registration, player card & insurance for one soccer year)
- Attach PHOTO for PLAYER CARD – or email image to jknapp4@gorge.net

TEAM FEE IS \$120 FOR 6-WEEK SUMMER LEAGUE (due before first game)
(Includes: Scheduling, Field Use, Awards & Referees: DOES NOT INCLUDE UNIFORMS)

Assumption of Risk for all Players

- * I agree to abide by the rules of the Mid-Columbia Women's Soccer League.
- * I understand the nature of soccer activities, and I am in good health and in proper physical condition to play soccer.
- * If I believe conditions or equipment to be unsafe at any time, I will discontinue participation.
- * I fully understand that (a) soccer activities involve risks and dangers of seriously bodily injury, including permanent disability, paralysis and death; (b) these risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the activity, the condition of the location in which the activity takes place or the negligence of the league organizers; and (c) there may be other risks and social and economic losses either not known by me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs and damages I incur as a result of my participation in soccer activities.
- * I hereby release, discharge and covenant not to sue the administrators, volunteers, participants, officials, and field owners.

Participant Signature

Date

Additional Signature for Players under 18 years old

- * My daughter is old enough to play in this league; she attends high school or equivalent.
- * I give my permission for the child named on this form to participate in the Mid-Columbia Women's Soccer League.

Parent or Guardian Signature

Date