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

Meridian Youth Soccer Organization Player Registration Form 2016-2017

4820A Poplar Springs Drive PMB #150 Meridian MS 39305 Register Online at <u>www.MeridianSoccer.com</u> New players must submit a birth certificate with registration form.



Registration form must be complete, accurate, and received by MYSO no later than August 1st.

REGISTRATION INCLUDES FALL AND SPRING SEASON & UNIFORM

Plaver's	Name	88	on	Birth	Certificate*
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<u>Age Group</u> Under 4	<u>Birth Year</u> 2013	<u>Reg. Fee</u> \$110	Player First Name *									
Under 5	2013	\$110										
Under 6	2012	\$110	Middle Initial *									
Under 7	2010	\$130										
Under 8	2009	\$130	Last Name *									
Under 10	2007/2008	\$130										
Under 12	2006/2005	\$130	Street Address									
HS Division	2004 & Up	\$55	Street Address									
			City/State/Zip Code									
HS Division - Fall	Only / Boys & Gi	rls / 7v7 format										
			Birth Date									
Description		Amount										
			Gender (Circle One)			Μ	ale /	Fema	le			
Enter Registration Fee Here												
Enter Registration Fee Here			Email Address									
\$25 Late Fee if After 08/01			School									
-\$10 Sibling Discount – Print		¢10	Health Concerns									
Name of Full Price Sibling Here		-\$10	and/or Medications									
\$300 to Sponsor a Team												
(Please include sponsor name)		Jersey Size (Circle One)	YXS	YS	VM	VI.	YXL	AS	аM	AT.	AXI.
Scholarship Fund				1 / 6	15	1 1/1	11	IAL	лb	AN	лL	AAL
Any Amount is Appreciated			Short Size (Circle One)	YXS	YS	YM	YL	YXL	AS	AM	AL	AXL
Total Payment	Ν	NO REFUNDS										

For game updates and free training opportunities visit <u>www.MeridianSoccer.com</u> and free training opportunities visit <u>www.Me</u>

FAMILY INFORMATION

Father:		
Phone #:		
Email:		

Mother:
Phone #:
Email:

Will you coach a team? Yes or No (Please Circle One) No experience required. We have a great Director of Coaching that will teach everything you need to know and provide you with lesson plans for each session. All coaches are 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 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.

Signature of Parent/Guardian

Date

If you have questions email registrar@MeridianSoccer.com / Mail registration form to MYSO 4820A Poplar Springs Dr. PMB #150 Meridian MS 39305