



# PLAYER REGISTRATION

## PLAYER INFORMATION

Player First Name: \_\_\_\_\_ Player Last Name: \_\_\_\_\_

Player Birthdate (mm/dd/yyyy): \_\_\_\_\_ Player Gender (circle one):    MALE    FEMALE

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Has athlete ever played competitive soccer? If yes, where? \_\_\_\_\_

## PARENT/GUARDIAN INFORMATION

Parent/Guardian First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Parent/Guardian Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

2<sup>nd</sup> Parent/Guardian First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_



2<sup>nd</sup> Parent/Guardian Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

2<sup>nd</sup> Parent/Guardian Email: \_\_\_\_\_

### (OFFICE USE ONLY)

Player participating at (circle one): FREE TRIAL / TRYOUT / ID CAMP      Office Assigned ID # (if necessary): \_\_\_\_\_

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