

Club Use Only:

Age group	
Area	
Fee	
Check #	

Excel Soccer Club Spring 2012 Registration

Please return TWO copies of this form, payment, and copy of birth certificate for new players, to:

PO Box 2519, Santa Cruz, CA 95063

www.exceloccerclub.org

Phone: 831-425-0405

All teams are co-ed. U19, U15, U12, U10, and U8 teams will field at least three girls at all times. Teams may have to play short if not enough girls are available.

Player last name:	Player first name:
Address:	
Email contact:	Home phone:
Player's school:	Area where you prefer to practice:
Parent/guardian 1 name:	
Home phone:	Work phone:
Parent/guardian 2 name:	
Home phone:	Work phone:
Emergency contact 1:	
Relationship:	Phone:
Emergency contact 2:	
Relationship:	Phone:

Player birthdate:
Male <input type="radio"/>
Female <input type="radio"/>
Seasons played rec
Seasons played comp
Volunteer:
Coach <input type="radio"/>
Assistant Coach <input type="radio"/>
Board Member <input type="radio"/>

I, the parent or guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of FIFA and Excel Soccer. Recognizing the possibility of physical injury associated with soccer and in consideration Excel accepting the registrant for the soccer programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify Excel Soccer and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs against claim by or on behalf of the registrant as a result of the registrant's participation in the Program and/or being transported to or from the same, which transportation I hereby authorize.

Print name: _____

Signature: _____ Date: _____

As the parent or legal guardian of the above named player, I hereby give consent for the emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

Print name: _____

Signature: _____ Date: _____

Cost: Before October 31: \$125 per player

November 1-30: \$135 per player

After November 30: \$150 per player