

Cosumnes River

Recreational Soccer League

2018 Season Membership Form

Player Information				
First Name:	Middle Name:		Last Name:	
Date of Birth(MM/DD/YY): _	//20 Gender:MF	School (During S	Season):	
Grade (During Season):	Team/Coach/Friend Request:			
1st Guardian Information				
First Name:	Last Name:		_ Phone Number: ()
Address:		City:		Zip:
	Cell:()			
	on in our programs and your child's soccer : Team Manager/Parent: Refer Team Sponsor: Other:	ree: Fields:	Board Member:	
2nd Guardian Information				
First Name:	Last Name:		Phone Number: (
Address:		City:		Zip:
Home Phone ()	Cell:()	Email:		
	on in our programs and your child's soccer : Team Manager/Parent: Refer Team Sponsor: Other:	ree: Fields:	Board Member:	
regulations of the Cosumnes Riv heirs, administrators, success officers, employees or agent an tors, officers, employees, agents the player's participation in th ness in printed, broadcast, and	the above named player, a minor, or player over Recreational Soccer League, US Club Socors, will be legally bound, and hereby released representatives, the parties, the owners as, and representatives from and against all be program. I further grant the League and other materials concerning the programs, progra	occer, and their affi ase and indemnify the and operators of fact claims, liabilities, of Clubs associated the provided such use the arms.	iliated organizations. I, the Cosumnes River Rec acilities used for their po damages from actions a he rights to use player's is related to the player's	the player our representative creational Soccer league, its rograms and respective directising out of connections with a names, picture and/or likes status as a participant in the
Signature:	Printed	Name:		Date:
	Received: Birth Document Received			
Scholarship: Registrat	ion Fee: \$ Received By:			Date: