



United States Amateur Soccer Association, Inc.

Affiliated with the United States Soccer Federation

7800 River Road • North Bergen, New Jersey 07047

(201) 861-6277

AMATEUR PLAYER REGISTRATION FORM

"A"

"AD"

PLAYER INSTRUCTIONS: Please complete the information requested in the shaded areas, including the date and your signature in the bottom segment of the form.

Please Use Ballpoint Pen and Print Firmly

Male

Female

Player's Name (Last Name First) _____ Player's Social Security No. _____

Address _____ Phone _____

City _____ State _____ Zip Code _____ Mo. _____ Day _____ Yr. _____
Date of Birth

U.S. Citizen Yes No Intent to become a citizen Yes No Country of Birth _____

TEAM REPRESENTATIVE INSTRUCTIONS: Please complete all information in this segment, then sign and date the bottom segment of the form before sending to the State Registrar, enclosing the appropriate fees.

THIS AMATEUR PLAYER REGISTRATION FORM MAY BE USED AS AN "A" FORM (Amateur) or as an "AD" Form (Amateur Detention)

Please mark the appropriate box at the top of the page and below.

"AD" Form Requires \$30.00

Code _____ State Association _____

League # _____ Current League _____

Team # _____ Current Team _____

Players Last Team Affiliation _____ Last Season _____

Team Representative Name (Last Name First) _____

Address _____ Phone _____

City _____ State _____ Zip Code _____

RELEASE AND DISCLAIMER

Soccer is a contact sport involving risk of serious injury, disability, or death. Not all risks are foreseeable. In consideration of being allowed to participate, I agree to release, waive, and covenant not to sue United States Soccer Federation or affiliates on account of injury, death, or property damage alleged to be caused in whole or in part by affiliates' actions or omissions.

I HAVE READ THE RELEASE & DISCLAIMER AND RECOGNIZED THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING. I KNOWINGLY ASSUME THE RISK.

Player's Signature _____ Date _____

Team Representative _____ Date _____

State Registrar _____ Date _____