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ADULT PLAYER REGISTRATION AND WAIVER

Club Name: Colorado Springs Soccer Club – Adult (CSSC) City: _____ State: CO
 Team Name: _____

I hereby consent to the above-named club registering me with US Club Soccer. I understand that I may be registered to only one US Club Soccer member club at a time. [Note: it will not be necessary to complete this form again as long as I am with the same club or team].

Player's Signature _____
Date

PLAYER'S INFORMATION

Player's Name: _____ Birthdate: _____

Driver's License #: _____ State: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____

Home Phone : _____ Cell Phone: _____ Bus Phone: _____

In an emergency, please contact the following:

Name _____ Cell Phone: _____ Home Phone: _____

LIABILITY WAIVER, RELEASE, AND INDEMNIFICATION AGREEMENT

I recognize the possibility of physical injury associated with soccer, and voluntarily accept and assume this risk as part of my playing soccer for the above-named soccer organization.

I hereby release, discharge, and otherwise indemnify my club and team, US Club Soccer, their sponsors, the USSF and its affiliated organizations, the soccer facility, and the employees and associated personnel of these organizations, against any claim by or on my behalf, as a result of my participation in US Club Soccer programs and competitions.

I also understand and accept that adult registration with US Club Soccer does not include primary or secondary accident or medical insurance, but DOES provide me the same liability insurance coverage afforded all other members of, and players and staff registered with, US Club Soccer.

Player's Signature _____ *Date* _____