



# 2023-24 WINTER SEASON PLAYER SIGNUP FORM

## NW Youth Soccer Association

NWYSA, PO Box 202, Comstock Park, Michigan 49321



### Player Age

Date Of Birth: \_\_\_\_\_ [Division Classification, Age As Of 31 July 2023, Example, If 8 As Of This Date, Then A Under 9 Player]

### Player Info

Name: \_\_\_\_\_ Girl: \_\_\_\_\_ Boy: \_\_\_\_\_ Parent Names: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone/s: \_\_\_\_\_ School District: \_\_\_\_\_  
Email/s: \_\_\_\_\_ Returning NW Player [Y/N]: \_\_\_\_\_

### Player Fee

- Under 7-8-9 Player [6-7-8 Years Old As Of 31 July 2023]: \$107-\$122 Range
- Under 10-11-12-13-14-15 Player [9-10-11-12-13-14-15 Years Old As Of 31 July 2023]: \$125-\$144 Range
- Adult: \$125-\$144 Range

### Player Shirt

\* Size: \_\_\_\_\_ [YXS, YS, YM, YL, YXL, AS, AM, AL, AXL, AXXL, AXXXL]

### Placement & Health Issues

- \* Is there a player/s your would like to be placement with if possible? \_\_\_\_\_
- \* Does your player have a health issue/s? \_\_\_\_\_

### Availability & Miscellaneous Information

- \* Is there a date/s between December 16th and February 3rd you will need to miss?  
\_\_\_\_\_
- \* Is there anything else your Head Coach should be aware of?  
\_\_\_\_\_  
\_\_\_\_\_

### Parent Volunteer

Position: Head Coach: \_\_\_\_\_ Assistant Coach: \_\_\_\_\_ Team Manager: \_\_\_\_\_ Name: \_\_\_\_\_  
Coach Team Shirt Size: \_\_\_\_\_ Email: \_\_\_\_\_

### Permission, Waiver And Release Of Liability

I hereby give my permission for my child or myself to participate in the activities of the NWYSA. In consideration for my child or myself being permitted to participate in the activities of the NWYSA on behalf of my child, myself, heirs, executors, administrators, subrogates, and assignors, I hereby release, waive and discharge the NWYSA and its departments, staff, coaches, managers, representatives, volunteers and their successors and assignors from any and all liability for personal or bodily injury, including death, resulting from any activity of the NWYSA, whether or not caused by the negligence of the NWYSA, to include that of the Walker Charter Academy, Alpine Township, Let's Play, and any other claim against these entities. In addition to granting permission for any photo or video of my child, myself or family to be used for NWYSA related purposes. I've read, agree to adhere to NWYSA polices and voluntary sign this permission, waiver, and release of liability:

Parent / Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### For Official Use Only

Date Rec'd: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Check #: \_\_\_\_\_ MO #: \_\_\_\_\_ PayPal #: \_\_\_\_\_