

# STSA REGISTRAION FORM - Spring 2009

Division: U-

## PLAYER INFORMATION:

\_\_\_\_\_  
PLAYER'S NAME Date of Birth: \_\_\_\_\_

\_\_\_\_\_ Sex: **M F**  
(Check if new) ADDRESS (CIRCLE)

\_\_\_\_\_  
CITY ZIPCODE

Parents Names: \_\_\_\_\_  Phone \_\_\_\_\_  
(Check if new)

EMAIL Address: \_\_\_\_\_  
(Check if new)

## Soccer Experience in years:

Recreation: \_\_\_\_\_ Travel: \_\_\_\_\_ Registered Last Fall or Spring? \_\_\_\_\_ (Yes or No)

**SORRY, due to the large number of special requests being made, we can no longer take team requests.**

## PARENT PARTICIPATION IS ESSENTIAL-PLEASE SELECT FROM THE FOLLOWING VOLUNTARY ACTIVITIES:

Coach  Assistant Coach  Son/daughter you wish to Coach: \_\_\_\_\_

Name of Coach or Assistant Coach: \_\_\_\_\_

Team Parent  Board Member  Tournament Work  Referee

## WAIVER:

My child, \_\_\_\_\_ has my permission to play competitive soccer in the Saginaw Township Soccer Association. In consideration of your accepting my child into the Saginaw Township Soccer Association, Inc., I relinquish the Association, its agents and assigns, from all potential rights and damage claims for injuries which may occur to said child as the result of sustaining bodily injury while participating in the program. I further understand that I am agreeing to indemnify and hold harmless the Saginaw Township Soccer Association, and all other persons mentioned above, from all claims which may be made by or on behalf of my child resulting from any injuries or damages allegedly incurred while participating in any STSA activities. It is further agreed that we will abide by the rules and regulations of the Saginaw Township Soccer Association, the Michigan State Youth Soccer Association, the United States Youth Soccer Association and the United States Soccer Federation.

## PARENT OR GUARDIAN'S

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## FEES:

**1 Player: \$ 65.00** Fee covers field & grounds upkeep, insurance through MSYSA, referee fees.

**2 Players: \$ 125.00** Fees DO NOT cover the cost of a Jersey which is \$15 in the concession stand.

**3 Players: \$ 175.00** Please check our web site for further seasonal details.

**4 Players: \$ 225.00**

A \$20.00 Late Fee per family will be assessed after the Registration Deadline of April 4th, 2009. After April 4th, you must contact your age group coordinator to verify placement on a team. The Spring Recreation Season begins Saturday May 2<sup>nd</sup>.

**Paid By:**  CASH  CERTIFICATE  CHECK Check Number \_\_\_\_\_



Mail form along with Check or Money Order  
to: STSA  
P.O. Box 6155  
Saginaw, MI 48603

PLEASE MAKE CHECKS PAYABLE TO "STSA"  
\*\*\*\* SORRY, NO REFUNDS \*\*\*\*\*