



Maine Metro F.C. Premier Soccer

Phone: 207-878-0316 / Fax: 207-878-8455
 URL: <http://www.mainemetrofc.com>
Player Registration Form



U-10 AND U-11 BOYS AND GIRLS SOCCER ACADEMY PROGRAM

Player's Full Name _____ Boy Girl Birth Date _____

Address _____ City _____ State _____ Zip _____

Number of Prior Seasons Played: _____ Last Team: _____

Date of Last Season: _____

Players Height: _____ Weight: _____ School: _____

Uniform Sizes: (circle current sizes)

	Youth				Adult			
Shirt	S	M	L	XL	S	M	L	XL
Shorts	S	M	L	XL	S	M	L	XL
Socks	S	M	L	XL	S	M	L	XL

Father's Name: _____ Home Phone _____ Bus Phone _____

Mother's Name: _____ Home Phone _____ Bus Phone _____

E-mail Address: _____ *(Please print clearly)*

Doctor's Name _____ Phone _____

In an Emergency when parents cannot be reached, please contact:

Name _____ Relationship _____ Phone _____

List any medical problems or prohibition player has: _____

IMPORTANT

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of Maine Metro F.C., its affiliated organizations and sponsors, including but not limited to his/her financial obligation to the club. Recognizing the possibility of physical injury associated with soccer and in consideration for Maine Metro F.C. accepting the applicant for its soccer programs and activities (the "Program"), I hereby release, discharge and/or otherwise indemnify Maine Metro F.C., its affiliated organizations and sponsors, the employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

Name: Parent/Legal Guardian (please print) _____

Signature X _____ Date: _____