



West Virginia Soccer Association

MEMBERSHIP FORM

Club Name: _____

OFFICIAL USE ONLY

Registration Fees: \$ _____
 Player Fee \$ _____
 Coaches Fee \$ _____
 Other \$ _____
 TOTAL PAID \$ _____

Cash: _____ Check # _____ Credit Card _____

Picture: Yes _____ No _____

Birth Certificate Verified Yes _____ No _____

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Birth Date _____ Male _____ Female _____

County of Birth: _____ County of Citizenship _____

Has this player played outside of the U.S.? _____ Yes _____ No

Father's Name _____ email _____ Cell # _____

Mother's Name _____ email _____ Cell # _____

Are you or do you plan to register on another team during the current Seasonal year (September 1 thru August 31) ___ Yes ___ No

If Yes Complete League Name _____ State _____ Team Name _____ Age Group _____

Please check Type of Team: Recreational Team _____ Competitive Team _____

_____ Yes, I authorize WVSA to include my child(ren)'s information in any lists which are sold to vendors

_____ No, My child(ren)'s contact information is to be used for WVSA-related business only

_____ Declined to answer

I grant USYS Parties the right to use the players name, picture and/or likeness in printed, broadcast and other material concerning the Programs provided such use is related to the players status as a participant in programs

_____ Yes _____ No

Uniform Sizes
___ Youth ___ Adult

Shirt XS S M L XL
Shorts XS S M L XL
Socks XS S M L XL

Other Children from Same Family registered with this league
Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

PARENTAL SUPPORT

We ask for active participation of all parents in our program. Circle area(s) in which you would be willing to help.

- Coach _____ Committee _____
- Asst Coach _____ Referee _____
- Team Manager _____ Fund Raising _____
- Team Parent _____ Special Projects _____
- Concessions _____ Donation _____
- Board Member _____ Newsletter _____
- Field Preparation _____ Clerical _____
- Other _____

List any Medical problem or prohibition the player has: _____

Person to notify in emergency: _____ Telephone: _____

Doctor to notify in emergency: _____ Telephone: _____

Number of prior seasons played: _____ League _____

Last Season Played _____ Rec _____ Travel _____ Middle School _____ High School _____

Height: _____ Weight _____ School: _____ Grade _____

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Parental Consent Agreements for Soccer Participation

In consideration of being allowed to participate in any way in the program, related events, and activities, I the undersigned, acknowledge, appreciate, and agree that: 1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death. 2. I am aware there are risks to me of exposure to directly or indirectly arising out of, contributed to, by, or resulting from an outbreak of any and all communicable disease, including but not limited to, the virus severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof. 3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others and assume full responsibility for my participation. 4. I willingly agree to comply with terms and conditions for participation. If I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately. 5. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS WVSA AND ITS MEMBER CLUBS AND LEAGUES, its officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (RELEASEES), from any and all claims, demands, losses, and liability arising out of or related to any INJURY, ILLNESS, SICKNESS, DISABILITY OR DEATH I may suffer, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE (UNDER AGE 18 AT TIME OF REGISTRATION) or ANY PLAYER OVER THE AGE OF 18. This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Recognizing the possibility of physical injury associated with soccer and in consideration for USYS/USS and its affiliates accepting the registrant for its soccer programs and activities (the Programs) I hereby release, discharge and/or otherwise indemnify USYS/USS, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrants participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

I, the parent/guardian of the above-named player, a minor, agree that the player and I will abide by the rules and regulations of the USYSA, its affiliated organizations and its sponsors ("USYSA Parties"). In consideration of the players participation in the soccer league programs and activities of the USYSA Parties (the "Program"), I, for myself and the player and our respective heirs, administrators and successors, intending to be legally bound, hereby release and indemnify the USYSA Parties, the owners and operators of the facilities used for the Programs, and their respective directors, officers, employees, agents and representatives from and against all claims, liabilities, damages or causes of action arising out of or in connection with the players participation in the Programs including, without limitation, players transportation to/from any Program, which transportation is hereby authorized.

I, _____ (Parent/Guardian Signature) accept and agree to all the above agreements for my child to participate in the West Virginia Soccer Association and it's member clubs and affiliates.