

Adena Futbol Club Registration

Please PRINT Clearly

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Area Code _____ Home Phone _____ Player's Cell # _____

DOB _____ Player's SS# _____

Player's email address: _____

Parent's e-mail address: _____

Fathers Name & Work/Cell Phone # _____

Mothers Name & Work/Cell Phone # _____

Consent & Waiver

I recognize and understand that soccer is a sport involving risks not encountered in every day play. With this understanding, in consideration of the Adena Futbol Club and GSCYSA permitting my child to participate in the soccer program, I covenant and agree to indemnify and hold harmless and do release, and forever discharge Adena Futbol Club, GSCYSA, both Boards of Directors, coaches, referees and other volunteers connected with these organizations, in any capacity, for any and all damages, claims, and/or liability arising out of any and all injury to or caused by my child. With this knowledge and understanding of the foregoing, this is to certify that my child has my permission to participate in the Adena Futbol Club.

All participants & parents must abide by the Scott County Parks & Rec. Physical/Verbal Altercation Policy. All participants are bound by the rules & regulations as stated in the GSCYSA By-Laws and Adena Futbol Club Rules and By-Laws.

I hereby authorize any and all emergency medical treatment deemed necessary by any physician, nurse or paramedic. A copy of this authorization shall be as effective as the original.

Parent/Guardian Name (print) _____

Signature _____ Date _____

Uniform Information:

New player uniform kits are \$70 each.

Please make checks payable to "Adena FC".

Size: YS YM YL AS AM

Jersey Number Choice #1 _____

Jersey Number Choice #2: _____ (NOTE: Some jersey numbers may not be available.)