



## BATON ROUGE SOCCER CLUB 2017-2018 3 YEAR OLD PROGRAM REGISTRATION FORM

Date: \_\_\_\_\_

A. Player Information: (Please Print Clearly.) Returning: \_\_\_\_\_ New: \_\_\_\_\_

Name: \_\_\_\_\_ Sex: M F Birthday: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_

School: \_\_\_\_\_ Grade \_\_\_\_\_

### B. Parent Information:

Parent: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Parent: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**D. Waiver:** I, the parent/guardian of the registrant, agree that I and the registrant will abide by the rules of this Association (BRSA), the Louisiana Soccer Association (LSA), the United States Soccer Federation (USSF) and their affiliated organizations. Recognizing the possibility of physical injury associated with soccer, and in consideration of the registrant being accepted as a participant in the BRSA soccer program, I hereby, agree to indemnify BRSA, LSA, and the USSF, their affiliated organizations, and all persons, officers, coaches, and officials, including the owners of fields and facilities used in the programs, for actions taken by the registrant; and hold harmless BRSA, LSA, the USSF, their affiliated organizations, and all persons, officers, coaches, and officials, including the owners of fields and facilities used in the program, from any and all liability of every nature, kind and description as a result of injury, hurt, or damage sustained by the registrant as a result of his/her participation in the BRSA soccer program and/or being transported to or from the same.

PARENT/GUARDIAN (Signature) \_\_\_\_\_ DATE \_\_\_\_\_

Each player will need a responsible adult present. BRSC will provide a uniform t-shirt.

Each player should also have shin guards, water, and bring a size 3 ball to every event.  
For more information on any of our programs, please visit our website at [www.brsoccer.org](http://www.brsoccer.org).