



United States Amateur Soccer Association, Inc.

Affiliated with the United States Soccer Federation

California Soccer Association North - 1346 Silver Avenue • San Francisco, California 94134-1226
(415) 467-1881 *Player Registration Fee Required*

AMATEUR PLAYER REGISTRATION FORM

☐**"A"**☐**"AD"**

PLAYER INSTRUCTIONS: Please complete the information requested in the shaded areas, including the date and your signature in the bottom segment of the form. Remember to sign page 2 also.
Please Type or Use Ballpoint Pen Firmly

☐**Male**☐**Female**

Player's Name (Last Name First) _____

Player's Pass No. (if known) _____

Address _____

Phone _____

City _____

State _____

Zip Code _____

Mo. / Day / Year _____

Date of Birth

Email Address (optional) _____

US. Citizen

☐

Yes

☐

No

Intent

to become a citizen

☐

Yes

☐

No

Country of Birth _____

TEAM REPRESENTATIVE INSTRUCTIONS: Please complete all information in this segment, then sign and date the bottom segment of the form before sending to the State Registrar, enclosing the appropriate fees.

California Soccer Association North (CSAN)

Code _____

State Association

League # _____

Current League

Team # _____

Current Team

Players Last Team Affiliation _____

Last Season _____

Team Representative Name (Last Name First) _____

Address _____

Phone _____

City _____

State _____

Zip Code _____

Email Address (optional) _____

**PASTE PASSPORT
STYLE PHOTO HERE
(FACE FORWARD
NO HAT,
GLASSES
OR MASK
IN GOOD LIGHTING)**

(Or email digital photo)

**Attach Photo in this
Box**

RELEASE AND DISCLAIMER

Soccer is a contact sport involving risk of serious injury, disability, illness or death. Not all risks are foreseeable. In consideration of being allowed to participate, I agree to release, waive, and covenant not to sue United States Soccer Federation or affiliates on account of injury, illness, death, or property damage alleged to be caused in whole or in part by affiliates' actions or omissions.

I HAVE READ THE RELEASE OF LIABILITY AND RECOGNIZED THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING. I KNOWINGLY ASSUME THE RISK.

Player's Signature _____

Date _____

Team Representative _____

Date _____

State Registrar _____

Date _____



ASSUMPTION AND ACKNOWLEDGMENT OF RISKS AND RELEASE OF LIABILITY AGREEMENT

In consideration of being allowed to participate in any way for the United States Adult Soccer Association, Inc., its Affiliates, Leagues, and Member Teams, its related events and activities, the undersigned, acknowledges, appreciates, and agrees that:

- 1) The risk of injury or illness from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury or illness does exist; and,
- 2) I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS OF INJURY OR ILLNESS, both known and unknown to me at the time of this agreement, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
- 3) I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will bring such to the attention of the nearest official immediately; and
- 4) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS the United States Adult Soccer Association, Inc., its Affiliates, Leagues and Member Teams, their officers, officials, agents and/or employees, other participants sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL ILLNESS, INJURY, DISABILITY, DEATH, 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; and
- 5) I will comply with all of the requirements of 34 U.S.C. 20341 as they pertain to my interaction with or observation of any person under 18 years old who participates in soccer in any way and with any decisions or regulations of the Center for Safe Sport as they may pertain to me.

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.

Age: _____ Date: _____ Participant Signature: _____

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

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 liabilities incident 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.

Date: _____ Parent/Guardian's Signature: _____

Emergency Phone Number: _____

Sportsmanship Agreement - CCSL 2022

We the league (Central California Soccer League) understand, and value the importance of good sportsmanship. The result is players who understand the value(s) of civility, and respect for others in their relationships both on, and off the soccer field.

Coaches, and players should show maximum respect for the game by always, and game day rules, respecting the opposition, the referees, and each other. Any behavior outside the bounds of positive encouragement may well warrant a team, and or player(s) sanction.

I agree to follow and obey all the league bylaws, and game day rules, along with all the obligations that it comes with.

Player full name as registered

Team Name

Player signature or parent if a minor

Date