



BYRON-BERGEN STING SOCCER CLUB

Registration 2009 Season

Player Information: (Please Print Clearly)						Team (Club use)			
Player's Name: <small>(Same as Birth Certificate)</small>									
Gender:	Male		Female		Date of Birth:	<small>(Attach Birth Certificate—if first time player)</small>			
Address:				Town:	Zip Code:				
Phone Number:			Cell (Mother) Phone:(Father)						
Father's Name:			Mother's Name:						
e-mail (Mother) address: (Father)									
<small>A fee of \$25 is required with the registration form. If the player does not make the final roster of the team, the \$25 will be refunded. When the player is put on the roster the \$25 will be applied towards the season fee. There are no refunds after rosters are final. Registration forms will not be accepted without the \$25 fee. Make checks payable to Byron-Bergen Soccer Club.</small>								Check #	
Medical/Health:									
Medical Insurance Company			Policy Number			Group Number			
Physician's Name						Telephone			
Hospital Name						Telephone			
Any known medical conditions we should be aware of:									
Any allergies that we should be aware of:									
Any medications the player is currently taking that we should be aware of:									
In case of an emergency and the Parent(s)/Guardian(s) cannot be reached, contact the following person(s):									
Name				Telephone					
Name				Telephone					
Waiver:									
<small>I/We give permission for any medical attention necessary to be administered to my/our child by a licensed Medical Professional in the event of an accident or injury until I/we can be contacted. This release is effective for the 2008 –2009 playing season. I/we will assume responsibility for payment of such treatments. I/we do further release, indemnify, and hold harmless the US Youth Soccer Assoc., NYSW Youth Soccer Assoc., Rochester District Youth Soccer Assoc., Byron-Bergen Sting Soccer Club, Gillam-Grant Community Center, Byron-Bergen School District, Town of Bergen, instructors, coaches, and any/all persons associated with the Byron-Bergen Sting Soccer Club.</small>									
Parent or Guardian's Signature						Date			
Player's Signature						Date			