



Player Participation Form

Player Information: (list LEGAL name as it appears on the birth certificate)

Player: _____
First Name Middle Name Last Name

Address: _____
Address City Zip Code

Home Phone: _____ Alternate Phone: _____

Birth Date: ____/____/____ Sex: Male Female E-mail: _____

Last Club and Team: _____ School: _____ Grade: ____ (in Fall)

Does your family reside within the Tualatin Hills Recreation Department Boundary No ___ Yes ___

If yes please provide your Tualatin Hills Recreation Department Family ID Number _____

Family Information:

Father: _____ Home Phone: _____
First Last

Employer: _____ Work Phone: _____
Company

Mother: _____ Home Phone: _____
First Last

Employer: _____ Work Phone: _____
Company

Parent/Guardian Consent to Participate:

As Parent/Guardian, I authorize my child to participate with the **Tualatin Hills United Soccer Club** as a player and agree to be bound by the club's Bylaws, Policies & Procedures, Club Member Handbook, and decisions of the Board of Directors. I understand my child will have the opportunity to participate in this activity and agree to pay the identified fees. Payments may be made by using PreEnroll.com or by submitting a check made out to THUSC. Failure to make payments by the due date will result in a \$30 late fee and may be cause to remove the player from the identified club activity and/or legal claims activity. I understand I have a binding financial agreement with THUSC and agree to make all payments by the specified due date. Furthermore agree that if my team or player causes a fine to be levied upon the club for ANY reason, that I will pay the amount of the fine as requested by the club within 14 days of said request.

Parent/Guardian Signature: _____ Date: _____

FOR REGISTRAR'S USE ONLY

Classic High School U10 Development

U14 Summer Clinic: _____

Notarized Medical Release Form

Copy of player's birth certificate or passport

Payment included: \$ _____ Check #: _____

Age Group:

Tryout Number:

Club Number: