



2002-2003 High School Soccer REGISTRATION FORM

Please complete and bring with birth certificate and medical release waiver to Tryouts.

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

Name: _____ Birth Date: ____/____/____ Male
Last First Middle M D Y Female

Address: _____
Address City Zip Code

Home Telephone: _____ E-mail: _____

Last team and coach: _____ School: (2002-03) _____ Grade: (2002-03) _____

Do you already have a THUSC Nike uniform? YES NO

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:

I, as Parent/Guardian, authorize my son/daughter to participate in the *Tualatin Hills United Soccer Club* as a player and agree to be bound by the club's By-Laws, Policies & Procedures, Club Member Handbook, and decisions of the Board of Directors. I understand my child will have the opportunity to participate in the 9-month high school training program and agree to pay the identified fees. The participation fee for this program is \$695 and includes Payment 1 for \$413 by 12/10/2002 and Payment 2 for \$282 by 2/10/2003. Selected teams (Gold and Mercury) will participate in the Y-League and each player on these teams will have one additional Payment 3 for \$150 by 4/10/2003. 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 team roster. I 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

Notorized Medical Release Form. Age Group: _____

Copy of player's birth certificate/passport.

Financial Aid Application.

Payment included for \$695 or \$413 Check #: _____

