

## **Player Participation Form**

Player Information: (list LEGAL name as it ap	pears on the birth certificate)	1
Player: First Name L		_
Address:  Address	ast Name	
Home Phone:	Alternate Phone:	Zip Code
Birth Date:/ Sex:Male _	Female E-mail:	
Last Club and Team:	School: (2003-04)	Grade: (2003-04)
Need a new Adidas club uniform?   YES   NO	Sizes Available: YS YM	I YL YXL AS AM AL AXL
Player Size: T-Shirt: Jersey: She	orts: Sock:	Sweats: Shoe:
Family Information:		
Eath an	Home Phone:	
Employer: Company Last	Last Work Phone:	
Company Mother:		
Mother:  First  Last  Employer:	Last Work Phone:	
Company		
Parent/Guardian Consent to Participate:  As Parent/Guardian, I authorize my child to participate with the by the club's Bylaws, Policies & Procedures, Club Member child will have the opportunity to participate in this activity preenroll.com or by submitting a check made out to THUSC, and may be cause to remove the player from the identified clube levied upon the club for ANY reason, that I will pay the am	Handbook, and decisions of the I and agree to pay the identified fee Failure to make payments by the b activity. I furthermore agree tha ount of the fine as requested by the	Board of Directors. I understand my es. Payments may be made by using e due date will result in a \$30 late feet if my team or player causes a fine to e club within 14 days of said request.
Parent/Guardian Signature:		Date:
Classic High School U14	STRAR'S USE ONLY Summer	Age Group:
Clinic:		Tryout Number:
<ul><li>Notorized Medical Release Form</li><li>Copy of player's birth certificate</li><li>Payment included: \$ Che</li></ul>		Club Number:

Portland, OR 97229

(503) 626-1923

http://www.thusc.org

515 NW Saltzman, PMB 821