



2021 SPRING SEASON - PLAYER SIGNUP FORM  
**NW Youth Soccer Association**  
 NWYSA, PO Box 202, Comstock Park, Michigan 49321



**Player Age**  
**Date Of Birth:** \_\_\_\_\_ [Division Classification, Age As Of July 31st 2020, Example, If 8 As Of This Date, Then Under 9 Player]  
**Division:** Under 2/3/4 Intro: \_\_\_ Under 4/5/6: \_\_\_ Under 7/8/9: \_\_\_ Under 10/11/12: \_\_\_ Under 13/14/15: \_\_\_

**Player Info**  
**Name:** \_\_\_\_\_ **Girl:** \_\_\_ **Boy:** \_\_\_ **Parents Names:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Phone/s:** \_\_\_\_\_ **School:** \_\_\_\_\_  
**Email/s:** \_\_\_\_\_ **Returning NW Player [Y/N]:** \_\_\_\_\_

**Player Fee** [Date Form And Fee Are Both Sent, Determines If The Signup Is Early, Regular Or Late]

**Early Signup Period > If Signing-Up October 19th Through January 31st > \$10 Discount**  
 Under 2/3/4 Intro \$30: \_\_\_ Under 4/5/6 \$40: \_\_\_ Under 7/8/9 \$40: \_\_\_ Under 10/11/12 \$65: \_\_\_ Under 13/14/15 \$75: \_\_\_

**Regular Signup Period > If Signing-Up February 1st Through March 14th**  
 Under 2/3/4 Intro \$40: \_\_\_ Under 4/5/6 \$50: \_\_\_ Under 7/8/9 \$50: \_\_\_ Under 10/11/12 \$75: \_\_\_ Under 13/14/15 \$85: \_\_\_

**Late Signup Period > If Signing-Up March 15th Through April 18th > Under 2-9 Add \$10 Or Under 10-15 Add \$15**  
 Under 2/3/4 Intro \$50: \_\_\_ Under 4/5/6 \$60: \_\_\_ Under 7/8/9 \$60: \_\_\_ Under 10/11/12 \$90: \_\_\_ Under 13/14/15 \$100: \_\_\_

[Discount Offers, Go To Website For Details] [If Signing-Up March 24th - April 18th, Contact The NWYSA Before Signing-Up]

**Player Wear**  
**Under 2-9 Player Team Shirt:** YXS: \_\_\_ YS: \_\_\_ YM: \_\_\_ YL: \_\_\_ AS: \_\_\_ AM: \_\_\_ AL: \_\_\_ AXL: \_\_\_  
**Under 10-15 Player Team Uniform Set:** Jersey [YM-AXL]: \_\_\_ Short [YM-AXL]: \_\_\_ Socks [S, M, L]: \_\_\_  
 Optional Under 2-15 Player Team Hoody [Can Be Worn As Team Top In Game] [Additional \$27] [Size]: \_\_\_\_\_

**Player Scheduling, Placement And Health**

\* Is there a weeknight, no more than 2, between Monday and Friday your child cannot practice? \_\_\_\_\_

\* Is there a like age relative/friend, no more than 2, in preferred order, your child would like to be placed with on the same team, if possible?  
 \_\_\_\_\_

\* In your opinion what is this child's overall athletic and soccer ability? Beginner: \_\_\_ Average: \_\_\_ Skilled: \_\_\_

\* Does your child have any health issues? \_\_\_\_\_

**Parent Volunteer**  
**Position:** Head Coach: \_\_\_ Assistant Coach: \_\_\_ Team Manager: \_\_\_ Program: \_\_\_ Other: \_\_\_  
**Name:** \_\_\_\_\_ **HC Requested Practice Nights [At Least 2]:** Mon: \_\_\_ Tue: \_\_\_ Wed: \_\_\_ Thur: \_\_\_ Fri: \_\_\_  
**Coach Team Top Size:** \_\_\_ **Relationship To Child:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Team - Program Sponsor Find**  
**Company:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
**Contact Person:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
[Sponsor's Jpeg Formatted Artwork, B/W And Color, Needs To Be Rec'd 21 Days In Advance Of The First Game Or Just The Sponsor's Name Will Be Printed On Team Tops]

**Permission, Waiver And Release Of Liability**  
 I hereby give my permission for my child or myself to participate in the activities of the NWYSA . In consideration for my child or myself being permitted to participate in the activities of the NWYSA on behalf of my child, myself, heirs, executors, administrators, subrogates and assignors, I hereby release, waive and discharge the NWYSA and its departments, staff, coaches, managers, representatives, volunteers and their successors and assignors from any and all liability for personal or bodily injury, including death, resulting from any activity of the NWYSA, whether or not caused by negligence of the NWYSA. In addition to granting permission for any picture of my child, myself or family to be used for NWYSA related purposes. I've read, agree to adhere to NWYSA polices and voluntary sign this permission, waiver and release of liability:  
**Parent / Legal Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For Official Use Only**  
**Date Rec'd:** \_\_\_\_\_ **Amount Paid:** \_\_\_\_\_ **Check #:** \_\_\_\_\_ **MO #:** \_\_\_\_\_ **PayPal #:** \_\_\_\_\_