

Niagara Pioneer Soccer League



P.O. Box 203
Youngstown, NY 14174
REGISTRATION FORM
www.niagarapioneer.com

League Use Only

DATE: _____

Check # _____

Cash

\$50.00 per person prior to April 1

\$65.00 per person after April 1

PLAYER INFORMATION

Has player played house soccer before? Yes _____ No _____

Number of years played? _____

For NPSL? Yes _____ No _____

_____/_____/_____
Birth Date: mm/dd/yyyy

(_____) _____ - _____
Contact # - number NPSL will use to contact you

_____ @ _____

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M F

Gender

PARENT INFORMATION

PARENT COACHES – IF YOU COACH – YOUR CHILD PLAYS FOR FREE (1 child per coach limit)

Coach _____ age group

Coach's Name: _____

LIABILITY RELEASE: As a parent or guardian of _____, I acknowledge that soccer is a sport which may involve physical contact and such participation in the NPSL presents a risk of injury to the above named child. Therefore, in consideration of the NPSL permitting the above named child to participate in the games, practices, or other activities of the NPSL and in further consideration of the NPSL providing limited medical/hospital insurance coverage, I undersigned, as parent or guardian of said minor, do hereby release and agree to hold harmless the NPSL, its agents, employees, coaches, officials and Board of Directors, the State of New York, the Office of Parks & Recreation, and their officers and employees, from any liability for personal injury or property damage which may occur to said minor as a result of his or her participation in the NPSL except to the extent of the aforementioned coverage.

SIGNATURE OF PARENT OR GUARDIAN _____



NPSL reserves the right to expel any player or fan for misconduct

PLEASE MAKE CHECKS PAYABLE TO **NPSL**
SEND CHECK AND COMPLETED FORM TO ADDRESS ABOVE.