



2009 Summer Competitive Player Information

Please complete information below so we can properly place your child and contact you about that placement. No payment is required with this form, but the player will not be rostered until at least the 1st installment is received.

	Under-09/10	Under-11/12	Under-13/14	Under-15 to Under-19
Full Registration	\$265	\$320	\$370	\$450
Installment Plan	\$89*	\$107*	\$124*	\$150*

*first installment due now , 2nd installment on 12/1, 3rd installment on 3/1

Primary Parent/Guardian Information

<i>first name</i>	<i>last name</i>	<i>male female</i> <i>circle sex</i>	<i>email</i>
<i>street address</i>	<i>city</i>	<i>state</i>	<i>ZIP code</i>
<i>home phone</i>	<i>work phone</i>	<i>cell phone</i>	<i>yes no</i>
<i>user name (only if new or changing existing!)</i>	<i>password</i>	<i>city of birth or maiden name</i>	<i>interested in coaching/managing?</i>

Additional Parent/Guardian Information

<i>first name</i>	<i>last name</i>	<i>male female</i> <i>circle sex</i>	<i>email</i>
<i>home phone</i>	<i>work phone</i>	<i>cell phone</i>	<i>yes no</i> <i>interested in coaching/managing?</i>

Player Information

<i>first name</i>	<i>middle initial</i>	<i>last name</i>	<i>male female</i> <i>circle sex</i>	<i>date of birth</i>
<i>Summer 2008 Team (if any)</i>	<i>grade (Fall '08)</i>	<i>uniform size</i>	<i>payment</i>	<i>yxs ys ym yl axs as am al axl</i>

Sioux Trail | Byrne | Gideon Pond | Sky Oaks | Vista View | Neill | Hidden Valley | MW Savage | Harriet Bishop | Metcalf | Nicollet | Eagle Ridge | Burnsville Sr. High
circle school attended or, if not an ISD 191 student, school whose attendance area is closest to your home

I, the parent/guardian of the Player, a minor, hereby give my full consent and approval for my child to participate as a member in the Burnsville Fire Soccer Club (BFSC) for the program(s) indicated above.

- I understand that the submission of this form in combination with the payment of any amount of money commits me to the BFSC for the season indicated, and I have not and will not register with any other MYSA-affiliated soccer club for the same season.
- I give the BFSC permission to use my child's name and/or image in print, electronic, and video format for legitimate club communication and publicity purposes unless I notify the BFSC otherwise in writing.
- I hereby verify that my child is fully capable of participating in the program, and that my child is healthy and has no physical or mental disabilities or infirmities that would restrict full participation in these activities, except as listed below. I agree to notify my child's coach of these disabilities/ infirmities.
- I agree that the Player and I will abide by the rules of the BFSC, Burnsville Athletic Club (BAC), Minnesota Youth Soccer Association (MYSA), and United States Youth Soccer Association (USYSA).
- Recognizing the possibility of physical injury associated with soccer and in consideration for the BFSC, BAC, MYSA and USYSA accepting the Player for this program and activities; I hereby release, discharge and/or otherwise indemnify the BFSC, BAC, MYSA and USYSA, its affiliated organizations and sponsors, their employees, volunteers, and associated personnel, including the owners of the fields and facilities utilized for the program, from any and all claims by or on behalf of the Player and the undersigned as a result of the Player's participation in the program and/or being transported to or from the same, which transportation I hereby authorize.

I have reviewed these terms. On behalf of my family and player the terms and conditions herein are accepted.

<i>parent/guardian signature</i>	<i>print parent/guardian name</i>	<i>date</i>
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