

**Ripley Youth Soccer Club
Indoor Registration
Youth and Adult**

Registration Fee \$25.00

Deadline is December 15. Please mail form and payment to:

**RYSC
46 Skyline View Dr.
Ripley, WV 25271**

(Adult or Youth)

PLAYER NAME _____ BIRTH DATE _____

ADDRESS _____

CITY _____ ZIP _____ Male / Female

PARENT/GUARDIAN _____

PHONE _____ CELL _____

ADDITIONAL CONTACT _____

PHONE _____ CELL _____

EMAIL _____

(Youth if played fall)

Played in fall yes no If yes, coaches name _____

By signing, you are acknowledging that you will abide by all bylaws and policies of RYSC and WVSA. Waiver/Release Form Recognizing the possibility of physical injury associated with soccer and in consideration for USYS/USS and its affiliates accepting the registrant for its soccer programs and activities (the "Programs") I hereby release, discharge and/or otherwise indemnify RYSC and WVSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

Print Name

Signature

Date