



PLAYER REGISTRATION FORM
(Type or Print Legibly)

Player

First Name: _____ Last Name: _____

Address: _____

Date of Birth: _____ Age: U- _____ Male: _____ Female: _____
(Month/Day/Year)

Player's contact/email: _____ Team Assignment: _____

Emergency Contact Name _____ Phone () - _____ Work () - _____

Parent(s)/Guardian(s)

First Name: _____ Last Name: _____

Cell phone: _____ Alternate Phone: _____ Email: _____

Mother ___ Father ___ Other (please identify) _____

First Name: _____ Last Name: _____

Cell phone: _____ Alternate Phone: _____ Email: _____

Mother ___ Father ___ Other (please identify) _____

Parental Volunteering/Commitment

(Please check one)

I will volunteer 2 hours of my time for the club this season.

I will not volunteer and I will pay a fee of \$25 instead.

Parent Signature _____

League: Morris County Youth Soccer Association

League #: 12

Club and No.: Elmwood Park Crew SC, #9513