



# Southwest Soccer Club Spring 2019 Youth Registration



website: <http://swsc-nc.com>

\*You can mail application & check to:  
PO Box 96 Jacksonville, NC 28541

Child's  
Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State: N.C.

Zip \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

Male \_\_\_\_ Female \_\_\_\_ Uniform Size: (please circle) YXS YS YM YL AS AM AL AXL Uniform Needed: Y / N

Played Fall 2018? Yes \_\_\_\_ No \_\_\_\_ Division Played U-\_\_\_\_ Team Name \_\_\_\_\_

E-Mail address \_\_\_\_\_

Father's Name \_\_\_\_\_ Employer \_\_\_\_\_ Business Phone \_\_\_\_\_ Cell # \_\_\_\_\_

Mother's Name \_\_\_\_\_ Employer \_\_\_\_\_ Business Phone \_\_\_\_\_ Cell# \_\_\_\_\_

List any medical problem or prohibition player has \_\_\_\_\_

**Person to Notify in an Emergency** \_\_\_\_\_ Telephone \_\_\_\_\_ Cell # \_\_\_\_\_

### Volunteers Needed (Please check and identify if it is Dad or Mom)

Coach \_\_\_\_ Asst. Coach \_\_\_\_ Team Manager \_\_\_\_ Field Preparation \_\_\_\_ Concession Stand \_\_\_\_ Field Marshal \_\_\_\_

SWSC is an all-volunteer organization dedicated to providing an enjoyable and rewarding soccer experience to children and their parents. We receive no public funding and our success is due to the hard work of volunteers.

### AUTHORIZATION TO PLAY

I authorize my child to play youth soccer with the Southwest Soccer Club (SWSC). I, one of the parents or guardians of the above named player, do hereby give my approval for my child to participation in any and all soccer activities. I do release and hold harmless from liability, whatever to the undersigned resulting from or in any manner arising out of any injury or damage, while participating in the activities of the Eastern Carolina Soccer Association. In case of injury to my child I waive all claims against organizers, board members or any supervisors appointed by them. **I further agree to abide by the rules, regulations and decisions of SWSC, the SWSC Executive Board, Officers or Referees.**

\_\_\_\_\_  
Parent or Guardian's Signature

\_\_\_\_\_  
Date

### **Treasurer Use Only**

**FEES (please check) Player Fee: \$ \_\_\_\_\_ Rec'd by \_\_\_\_\_**

\_\_\_\_\_ \$45.00 Micro (U4, U-5 & U-6)

Date: \_\_\_\_\_ Receipt # \_\_\_\_\_

\_\_\_\_\_ \$50.00 CAMSL (U7, U-8)

Age Division: U- \_\_\_\_\_

\_\_\_\_\_ \$55.00 Recreation (U-9, U-10)

\_\_\_\_\_ \$60.00 Recreation (U-12 - U-18)

\_\_\_\_\_ \$90.00 Select

Assigned Team: \_\_\_\_\_

**NOTE: There will be a \$5.00 Late Fee for registrations received after January 17, 2019**