

## Missouri Youth Soccer Association MEMBERSHIP FORM



You must complete a separate form per team participating with

			A(	SE/DIV
		Secondary		
				ork and list name of the
,	strator belo	w. Name must b	oe filled in as	it appears on the player's
<u>te.</u>				
Month	Date	Year		
cense number. All coac kidsafe disclosure state is form must be done on	ches will be requence. All team named at mysa.or	uired to submit the co managers must subm g.	opy of their coacho nit a copy of the co	es license and a copy of the onfirmation page of the kidsafe
List any medical problem or prohibition player has				PARENT SUPPORT
rson (other than par	ents) Name _			Head Coach
Phone (	( <b>H</b> )	Phone (W)		Assistant Coach
			_ Grade	Team Parent
lder that answers yes	or has a forei	ign birth certificate,	, must fill out th	
		• /	_	
	ns and activitie	es of the USYSA Pa	arties (the Progr	ams), I, for myself and the
ive heirs, administrat				l, hereby release and indemnify
ive heirs, administrat e owners and operato	ors of the facili	ities used for the Pro	ograms, and the	eir respective directors,
ive heirs, administrate e owners and operato ents and representati	ors of the facili ives from and a	ities used for the Pro against all claims, li	ograms, and the iabilities, damag	eir respective directors, ges or causes of action arising
ive heirs, administrate owners and operato ents and representativith the player's parany program, which	ors of the facilities from and a rticipation in the transportation	ities used for the Pro against all claims, li the Programs includ on is hereby authoriz	ograms, and the iabilities, damag ling, without lin zed. I future gr	eir respective directors, ges or causes of action arising nitation, player's ant the USYSA Parties the
ive heirs, administrate owners and operato ents and representativith the player's parany program, which	ors of the facilities from and a rticipation in the atransportation or likeness in p	ities used for the Pro against all claims, li the Programs includ on is hereby authoriz printed, broadcast a	ograms, and the iabilities, damag ling, without lin zed. I future gr and other mater	eir respective directors, ges or causes of action arising nitation, player's
	(	yer/coach/administrator below te.	team dual roster for must be submitted with yer/coach/administrator below. Name must be te.	Competitive Secondary Recreation team dual roster for must be submitted with this paperwood team dual roster for must be submitted with this paperwood team dual roster for must be submitted with this paperwood team dual roster for must be filled in as te.