



# Adult Registration Form

<b>FOR OFFICE USE ONLY</b>		Local <input type="checkbox"/>
Position: _____		
Team: _____		Affinity <input type="checkbox"/>

<b>Registrant's Information</b>	<b>Last Name</b>		<b>First Name</b>		<b>Middle Initial</b>	<b>Nickname</b>
	<b>Mailing Address</b>				<b>City</b>	<b>Zip</b>
	<b>Home Phone Number</b>		<b>Cell Phone Number</b>		<b>Work Phone Number</b>	
	( ) -		( ) -		( ) -	
	<b>Date of Birth</b>	<b>Gender</b>	<b>Driver's License Number</b>	<b>State of Issue</b>	<b>Expiration Date</b>	
	/ /					
	<b>Position(s) Currently Applying For:</b>			<b>Previous Position(s) in VYSO</b>		
	<b>Email Address</b>			<b>Children in VYSO</b>	<b>Age</b>	
					<b>Age</b>	
			<b>Age</b>			
			<b>Age</b>			

<b>Registrant's Consent &amp; Signature</b>	<b>PARTICIPATION CONSENT</b>		<p>The Victoria Youth Soccer Organization, VYSO, is a member of the South Texas Youth Soccer Association, STYSA.</p> <p>STYSA requires that all coaches, assistant coaches, managers, trainers, volunteer administrators, board members, referees, referee instructors, referee assigners, and staff/employees over the age of 17 must successfully pass a background check and receive an Adult Participation Pass in order to participate in its youth soccer programs. This Adult Participation Pass must be visible at all times whether at practice or games.</p> <p>Please contact the VYSO Registrar at 877-936-8873 if you have any questions. You can also visit the VYSO website, www.vyso.org.</p>
	<p>By signing below, I, the registrant or parent/guardian if registrant is a minor, agree that the registrant will abide by the rules of VYSO, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for VYSO accepting the registrant for its soccer programs and activities, I, together with my heirs, spouse, children, and all others claiming a recognized relation to me, hereby release, discharge and/or otherwise indemnify VYSO, its affiliated organizations and sponsors, their employees and associated personnel, including owners of the fields and facilities, against any claim by or on behalf of the registrant's participation in the VYSO soccer programs and/or being transported to or from the same, which transportation I hereby authorize. I acknowledge and recognize that this waiver includes any and all negligence committed by VYSO or any person acting in concert with VYSO, including any and all employees, invitees, or board members.</p>		
	<b>CONSENT FOR BACKGROUND CHECK</b>		
	<p>By signing below, I grant permission for the background check necessary to obtain an Adult Participation Pass that is required in order to participate in the VYSO soccer program. I acknowledge that if I do not pass this background check my participation in the soccer program will be immediately terminated.</p>		
	<b>NOTICE OF PHOTOGRAPHY RELEASE</b>		
	<p>I, the registrant, or parent/guardian if registrant is a minor, by signing below, hereby grant VYSO permission to publish in print or electronic format the likeness or image of the registrant. I release all claims against VYSO with respect to copyright ownership and publication including any claim for compensation related to the use of the materials. VYSO will not use identifying information such as names, street or mailing addresses, email addresses or phone numbers.</p>		
	<b>Registrant or Parent/Guardian's Signature</b>		
	Signature _____		
Printed Name _____			
Date: _____			

<b>FOR OFFICE USE ONLY</b>			
KidSafe #		Printed/Signed by Registrar	Laminated
Expiration:		Picture Attached	Given to Registrant
Season:		Signed by Registrant	Registrant's Initials
Notes/Comments:			