

## NJS Academy Youth Soccer Tryouts/Registration Form

Please fill in all information below. Have your parent or guardian review and sign waivers and release of liability at the very bottom. Remember to bring completed form with you to your tryout.

Team Player Is Eligible For: Boys Girls U Birth Date:	
Player's Name:	
Playing Experience:	
Last Team:	Position:
Address:	
Street	Town Zip
Parent Email:	Player Email:
Phone:	Cell:
Parent's Name(s)	
Emergency Contact:	
Emergency Phone:	
In consideration of being allowed to par related events and activities, the under some some some some some some some some	an will instruct the minor participant that prior to participating her or she should inspect d if the participant believes anything is unsafe, he or she should immediately advise his or
SIGNING I AND SIGN IT VOLUNTARILY.	
Parent Signature:	Date: