



Ardsley North Hills Athletic Association

ANHAA Intramural Soccer

911 Avenue G, Ardsley, PA 19038

Email: soccer@anhaa.org / Website: www.anhaa.org

Member of the
Eastern Pennsylvania Youth Soccer Association

PARTICIPANT REGISTRATION FORM

Check ONE: Travel **Check ONE:** New EPYSA Registrant **Check ONE:** Player **LEAGUE:** Intramural
 Intramural Returning Registrant Coach **Club Name:** ANHAA
Age Division: _____

Last Name _____ First Name _____
 Street Address _____
 City _____ State _____ Zip Code _____
 Telephone: work _____ home _____ fax _____
 Email address _____
 Birth Date (mm/dd/yyyy) _____ Sex: M / F Parent/Guardian name: _____

Release Statement:

Note: The statement should be signed by parent/guardian for minor player, coach and administrator for themselves.
 I, the parent/guardian of the registrant, a minor, or adult registrant of legal age, agree that I and the registrant will abide by the rules of ANHAA and the EPYSA, their affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for ANHAA and the EPYSA accepting the registrant for its sponsors and activities, I hereby release, discharge and/or otherwise indemnify ANHAA and the EPYSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for their Program, against any claim by or on behalf of the registrant as a result if the registrant's participation in the Program, and/or being transported to and from the same, which transportation I hereby authorize.

Parent(s)/Guardian(s) or Adult signature _____ Date (mm/dd/yyyy) _____

Parent participation (please check one):

- | | |
|--|--|
| <input type="checkbox"/> Coach | <input type="checkbox"/> Opening Day |
| <input type="checkbox"/> Assistant Coach | <input type="checkbox"/> Refreshment Stand |
| <input type="checkbox"/> Field Maintenance | <input type="checkbox"/> Team Coordinator |

Fee: Received prior to 1/1/08 \$75.00
 Received prior to 5/1/08 \$80.00
 Received after 5/1/08 \$90.00

(Make check payable to ANHAA)
 Check Number: _____