



Campton United Soccer Club

PO Box 1187
St. Charles, Illinois 60175
Phone: 630-377-9292
Fax: 630-377-9287

Player Name: _____

Gender: Boy Girl

Birth Date: _____

School Grade: _____

Club Last Played for: _____

Team Last Played on: _____

Division this Team Played in: _____

TRYOUT #: _____

AGE GROUP: _____

BOY **GIRL**

GK **GK/Field** **Field**

New **Returning**

CUSC Use Only

Years Experience Playing Competitive Soccer: _____

Position: Goalkeeper Defense Midfielder Forward/Striker

Fathers Name: _____

Mothers Name: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Emergency Contact: _____ Phone: _____

Comments: _____

My child/ward has my permission to participate in Campton United Soccer Club's open tryouts. I hereby certify that my child/ward is in good health and able to participate in all activities. I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages, or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims my minor child/ward or I may have (or accrue to my child/ward or me) as a result of participating in this program/activity against Campton United Soccer Club, including its officials, agents, volunteers and employees. I do hereby fully release and forever discharge Campton United Soccer Club from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to my minor child/ward or me and arising out of, connected with, or in any associated with this program/activity. In the event of a medical emergency, I grant permission for my child/ward to receive emergency treatment at a local hospital only after reasonable attempts have been made to contact me.

PRINTED NAME OF PARENT OR GUARDIAN

SIGNATURE OF PARENT OR GUARDIAN DATE

RELATIONSHIP TO MINOR

DATE