



**TEXARKANA SOCCER ASSOCIATION**  
Member of United States Youth Soccer  
Association and the  
Arkansas State Soccer Association  
[www.TexarkanaSoccer.com](http://www.TexarkanaSoccer.com)

## ADULT CO-ED SPRING 2008 SEASON REGISTRATION FORM

**Texarkana Soccer Association** is now registering for the Spring 2008 season of the Adult Co-Ed Recreational Soccer League. Both individual and team registrations will be accepted. Individuals will be contacted by a Team Manager upon team formation. Team formation is subject to review and approval by the TSA Board. All **games** will be played on Saturdays at Grady T. Wallace Park beginning March 8<sup>th</sup>. Games will be small-sided (7 vs 7 – max 5 men on field; or 9 vs 9 – max 7 men on field) depending on size and number of teams formed. For updated information or to contact us visit the TSA website at [www.TexarkanaSoccer.com](http://www.TexarkanaSoccer.com).

**To Register with Texarkana Soccer Association for the Spring 2008 Adult season, please follow the steps below:**

- 1) Complete this form only if you are 18 years or older (as of March 8<sup>th</sup>, 2008);
- 2) Sign the release below where indicated;
- 3) Enclose a check made payable to TSA;
  - a. **\$50** individual Player Fee;
  - b. **Less \$10 discount** for Returning Players from the Fall 2007 Season;
  - c. **Add \$10 Late Fee** if post marked after Feb 22<sup>nd</sup> 2007;
- 4) **Mail Registration Form(s) to TSA, P.O. Box 6183, Texarkana, TX 75505.**

### PLAYER INFORMATION (Please Print Legibly)

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 HOME PHONE \_\_\_\_\_ GENDER ( M / F ) \_\_\_\_\_ BIRTHDATE \_\_\_\_\_  
 CELL PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_ MM DD YY  
 EMAIL ADDRESS \_\_\_\_\_

REGISTRATION TYPE: TEAM / INDIVIDUAL (CIRCLE ONE)  
 EXPERIENCE LEVEL: NONE / YOUTH / HIGH SCHOOL / COLLEGE / ADULT REC / ADULT COMP  
 IF YOU ARE A RETURNING PLAYER, DO YOU WISH TO REMAIN ON THE SAME TEAM? YES / NO  
 IF NEEDED, WOULD YOU VOLUNTEER AS A TEAM MANAGER? YES / NO  
 IF REGISTERING ON A TEAM FILL OUT THE INFORMATION BELOW (MAXIMUM ROSTER SIZE IS 14)  
 TEAM NAME: \_\_\_\_\_  
 TEAM MANAGER'S NAME \_\_\_\_\_

### LEAGUE SUPPORT

Check areas(s) in which you would be willing to help.

- Referee
- Field Preparation
- Sponsor
- Publicity
- Fund Raising
- Other \_\_\_\_\_

### IMPORTANT

I, the above mentioned player registrant, agree that I will abide by the rules of Texarkana Soccer Association (TSA), the USYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration of TSA and USYSA accepting registrant for its soccer activities (the "Program"), I hereby release, discharge and otherwise indemnify TSA and USYSA, its affiliated organizations and sponsors, their employees and their associated personnel, including the owners of fields and facilities used for the Program, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Program and/or being transported to or from the same, which transportation I hereby authorize.

NAME: \_\_\_\_\_ PLEASE PRINT

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### NO REFUNDS AFTER THE FIRST GAME

(Refunds will be less a \$3 processing fee)

**REGISTRATION DEADLINE IS FEBRUARY 22<sup>ND</sup>, 2008**

### OFFICIAL USE ONLY

Registration fee:	
Check # / Cash:	
Received By:	
Date:	