

# NRUSA ADULT PROGRAM

## Individual Registration – Spring 2010 Season

**Placement Information** (Check league and provide Team Name and Manager, if applicable)

	Individual Signup (Check here if you do not have a team, we will place you on a team)	
	A League	Team Name: _____
	B League	Team Manager: _____

**Personal Information** (Please PRINT clearly and circle the appropriate answers.)

Name:			Sex (circle):	F	M
Last	First	MI	Date of Birth:		
Address:					
Primary Phone:			Secondary Phone:		
Primary Email (PRINT CLEARLY):			Secondary Email (PRINT CLEARLY):		
Years playing experience:			Positions:		

**Emergency Information**

In case of emergency, contact the following individuals (parents will always be contacted first):			
Name	Relationship	Home phone	Cell phone
_____	_____	_____	_____
Insurance Information:			
Company Name		Policy Holder	Policy Number
_____	_____	_____	_____

**Volunteer Section** (NRUSA is a volunteer organization. Please circle areas you are willing to assist with.)

Coach	Assistant Coach	Team Parent	Field Lining	Fundraising	Other:
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**Mandatory Waiver** (Be sure to sign and date before returning form.)

<p>I realize that, by participating in this soccer program, I may be accidentally injured. I hereby certify that I have no medical problems that could be aggravated by playing soccer. I hereby waive and release the NRUSA, Inc., its representatives, its assignees, its successors and/or the Town of Blacksburg, Town of Christiansburg, Montgomery County and Montgomery County Public School System from any and all claims I may make for any and all injuries suffered by myself due to my participation in the activities of this League or of the NRUSA, Inc. I hereby give my permission for a representative of the NRUSA to procure immediate medical attention in the case of a medical emergency. I further understand that I will be responsible for any and all costs associated with the medical attention including but not limited to ambulance, emergency room, doctor's fees and treatment costs.</p> <p>Signature: _____ Date: _____</p>	
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Please return this form with check or money order for \$80/player.

***Deadline for Registration is February 12 (received in office) with no late fee. \$15 late fee from February 13-17.***

NO REGISTRATIONS WILL BE ACCEPTED AFTER February 17.

**Spring 2010 season runs from March 15 – May 9.** More detailed information on the league can be found on our web page at [www.nrusa.org](http://www.nrusa.org).

Please send completed form with payment to:

**NRUSA – Adult Soccer**  
**2890 N. Franklin Street, Suite D**  
**Christiansburg, VA 24073**