



# Encinitas Express

## Soccer

### 2012 Tryouts

#### Player Information:

First Name

Last Name

DOB (MM/DD/YYYY)

Prior Team

Position

#### Parent Information

First Name

Last Name

Home Phone

Cell phone

E-mail Address:

#### Additional Information

Shirt Size

**Check here if you will be requesting financial aid. *Eligible for qualified families. Proof required at the time of registration.***

**IMPORTANT-I/We, the parent/guardian of the above named player, a minor, and the above named player agree to the following:**

I hereby release, discharge and/or otherwise indemnify Encinitas Express soccer and its associated personnel, including the Board of Directors, Coaching Staff, League Administrators, and the owners of the fields and facilities utilized by Encinitas Express, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Encinitas Express tryout. In the event of an emergency or non-emergency situation requiring medical treatment, I hereby grant permission for any and all medical and/or dental attention to be administered to my child/children, in the even of an accidental injury or illness, until such time as I can be contacted. This permission includes, but is not limited to, the administration of first aid, the use of an ambulance, and the administration of anesthesia and/or surgery, under the recommendation of qualified medical personnel.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_