

**Tri-Village Soccer Association  
Application for  
Santos Futbol Club**

**Santos Use Only:**

**Tryout #** \_\_\_\_\_ **Team:** \_\_\_\_\_ **Night 1** \_\_\_\_\_ **Night 2** \_\_\_\_\_

**Age Group:** U8/9, U10, U11, U12, U13, U14, U15, U16, U17, U18

**Player Information**

**First Name:** \_\_\_\_\_ **M.I.** \_\_\_\_\_ **Last Name** \_\_\_\_\_

**Address:** \_\_\_\_\_

**School Attending/Grade in Fall** \_\_\_\_\_

**Gender:** M/F    **Birthdate:** \_\_\_\_\_

**Prior Soccer Experience:** \_\_\_\_\_

**Parent/Guardian Information** *Please print clearly*

**Father Information:**

**Name:** \_\_\_\_\_ **Home # :** \_\_\_\_\_ **Cell#:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Mother Information:**

**Name:** \_\_\_\_\_ **Home #** \_\_\_\_\_ **Cell #** \_\_\_\_\_

**Email address** \_\_\_\_\_

**Medical Information for TRYOUTS**

**Emergency Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Phone Number(s) where we can reach you this weekend:**

**1st** \_\_\_\_\_ **2<sup>nd</sup>** \_\_\_\_\_ **3<sup>rd</sup>** \_\_\_\_\_ **4<sup>th</sup>** \_\_\_\_\_

**Please Sign the Waiver on the Reverse Side**

## Waiver of Liability

We are pleased to have your child participate in the Tri-Village Soccer Association/Santos Futbol Club youth soccer program. Although we try to make games and practices as safe as possible, there is no way to totally eliminate the possibility of an injury to a participating child. As a non-profit organization, TVSA, its volunteers and officers, employees, or agents, including the Santos Futbol Club, cannot reasonably assume the financial responsibility for an injury that a child might sustain at a game, practice or tryout.

We encourage you to observe a few obvious precautions. Your child should not participate if she/he is ill, has a full stomach or is wearing improper attire. No jewelry (i.e. pierced earrings, watches, etc.) can be worn while playing.

To permit your child to participate in our youth soccer program you attest that:

**“I hereby consent to my child’s participation in the Tri-Village Soccer Association Soccer Program. I agree to hold the City of Upper Arlington, the Tri-Village Soccer Association, Inc. and all its trustees, officers, volunteers, employees and agents, including the Santos Futbol Club, in the program harmless for any accidents or injuries to my child while participating in any TVSA sponsored events, practices and or games.”**

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**Player’s Signature**

Date

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Print Players Signature

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**Parent/Guardian Signature**

Date

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Print Parent/Guardian Signature