

# Travel Team Registration 2007



## Greenville Area Soccer Association



*Catch the Fever*

(Must be 10 years old by August 1, 2006)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ SS # \_\_\_\_\_

BIRTH DATE \_\_\_\_\_ AGE ON AUGUST 1, 2006 \_\_\_\_\_

SCHOOL DISTRICT \_\_\_\_\_ GRADE \_\_\_\_\_

WHAT TOWNSHIP OR BOROUGH DO YOU LIVE IN? \_\_\_\_\_

MALE \_\_\_ FEMALE \_\_\_ COPY: \_\_\_ Birth Certificate \_\_\_ Picture

### WAIVER OF LIABILITY



I, the undersigned, being parent or legal guardian, do hereby consent to my son/ daughter playing in the Greenville Area Soccer Association League and am fully aware of the risk involved by participating in the sport of soccer. Being fully aware of these risks, I am willing to personally assume these risks and will not hold the Greenville Area Soccer Association, Greenville Area Leisure Services Association, Greenville Area School District, Borough of Greenville, officers, managers, directors, coaches, or employees of each responsible for any injuries which may be sustained as a result of participation in the league.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

_____ REGISTRATION FEE \$65	<b>GALSA USER'S FEES:</b>	<b>Additional Sibling (s)</b>
_____ GALSA USER FEE	<i>Greenville Boro</i> \$10	\$ 5
	<i>Hempfield</i> \$30	\$15
_____ TOTAL RECEIVED	<i>Sugar Grove</i> \$30	\$15
	<i>Jamestown</i> \$30	\$15
	<i>Reynolds</i> \$30	\$15
CHECK _____ CASH _____	<i>Commodore Perry</i> \$30	\$15
	<i>Outside GALSA Svc. Area</i> \$30	\$15
DATE REGISTERED: _____	<b>REGISTERED BY:</b> _____	