



# Ranger Development League FALL 2014 & Spring 2015 TRYOUT REGISTRATION FORM

\$5.00 Tryout Fee due at registration—one time fee

**BRING COMPLETED REGISTRATION FORM TO TURN IN AT TRYOUTS.**  
**PLEASE DO NOT MAIL TO OR DROP OFF AT WCYSA OFFICE**

**Please be sure to PRINT legibly**

*Player's date of birth must  
fall between  
August 1<sup>st</sup> 2002 and  
July 31<sup>st</sup> 2004*

Player's Date of Birth: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Player's Last Name: \_\_\_\_\_

Player's First Name (legal name—no abbreviations): \_\_\_\_\_ Circle Gender: M F

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Ph: \_\_\_\_\_ Cell Ph: \_\_\_\_\_

E-mail (required): \_\_\_\_\_ Parent's Name: \_\_\_\_\_

Did you play Fall 13 or Spring 14 Soccer? \_\_\_\_\_ Recreational Club: \_\_\_\_\_

Please check here if you are trying out as a goal keeper

There are two tryout dates for RDL May 2<sup>nd</sup> and May 4<sup>th</sup>—it is recommended but not required that you attend both tryouts.

### Release of Liability and Consent for Emergency Medical Treatment

In recognizing the possibility of physical injury associated with soccer and in consideration for WCYSA accepting the registrant for tryouts, I hereby release, discharge and/or otherwise indemnify the WCYSA, its affiliated organizations, sponsors, employees, and associated personnel, including the owner of the fields and facilities utilized by the tryouts, against any claim by or on behalf of the registrant as a result of the registrant's participation in the tryouts. After all attempts have been made to contact the above parent/guardian, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb, or well being of the registrant.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Try out fee of \$5.00 due when you check in at registration desk on try out day.  
This fee will only be charged once—you do not pay the fee for the second day of try outs.

*If you did not play soccer for a club or association affiliated with Washington Youth Soccer this Fall or Spring, you must pay a \$15 registration fee at the time of try outs to cover insurance fees.*

### For Office Use Only:

Tryout Registration # \_\_\_\_\_ Attend both T/O: May 2nd \_\_\_\_\_ May 4th \_\_\_\_\_

\$15 Insurance Fee charged: YES NO