

Whatcom FC Rangers BU 12 and GU 12 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

	I LEASE DO NOT MA	AIL .	
Please be sure to PRINT legibly		Refer to the Ranger website for birthdates associated with	
Player's Date of Birth: Month:	Day:	Year:	
Player's Last Name <u>:</u>			
Player's First Name(legal name—no abbreviation	ns):		Circle Gender: M F
Mailing Address:	City:		Zip Code:
Home Ph:	Cell Ph:		
E-mail (required):	Paren	t's Name:	
Did you play Fall 13 or Spring 14 Soccer?_	Select or Re	c Club:	
Please check here if you are trying	ng out as a goal keeper		
There are two tryout dates for all a	age groups it is recommende	ed but not required	l to attend both tryouts.
Release of Liability ar In recognizing the possibility of physical injury a tryouts, I hereby release, discharge and/or other associated personnel, including the owner of the registrant as a result of the registrant's participarent/guardian, I hereby give consent for emerging Dentistry. This care may be given under whatever	associated with soccer and in wise indemnify the WCYSA, fields and facilities utilized b pation in the tryouts. After gency medical care prescribed	consideration for it's affiliated orgo by the tryouts, aga r all attempts ha d by a duly licen	r WCYSA accepting the registrant for ganizations, sponsors, employees, and ainst any claim by or on behalf of the ave been made to contact the above sed Doctor of Medicine or Doctor of
Parent/Guardian Signature:	Date:		
PLAYING UP RULES: A player may "play up" on any tea their correct age group as well as the age group they are of the age group that they trying out for. The Technical Di	wishing to "play up" in. Players "pl irector will make the final decision	aying up" must be o	ne of the "Top 5" players on the Gold team
If you did not play soccer for a club or association a \$15 registration	on affiliated with Washington on fee at the time of try outs to		
	For Office Use Only		

Attend both T/O: Y or N Injured: _____

\$15 Insurance Fee charged: YES NO Tryout Fee Paid _____

Tryout Registration #