



Williams Valley Soccer Association 2025

Registration Fee: \$35.00 first child per family
\$30.00 second child per family
\$25.00 for each additional child per family

Fundraising/buyout fee: \$45.00 per child

WVSA Use Only

Division: _____

Grade as of the **2025/2026** School Year _____

SCYSA may require proof of grade. For players in 3rd through 8th grade, a report card or screenshot of the Skyward portal may be needed for registration.

Age: _____ Birth Date: _____ Gender: _____

First Name: _____ Last Name: _____

Street Address: _____

City, State, Zip: _____

Parent/Guardian Name: _____

Parent/Guardian Phone Number: _____

Parent/Guardian Name: _____

Parent/Guardian Phone Number: _____

Email Address: _____

Emergency Contact Name: _____ Emergency Contact Phone: _____

Physician's Name: _____ Physician's Phone: _____

Does this child have any disabilities, handicaps, present injuries or limitations, allergies, hemophilia, heart condition, history of respiratory illness, or any other significant medical condition? Yes No

If Yes, list here: _____

Player Shirt Size (circle one): YXS YS YM YL AS AM AL AXL A2XL

Jersey Number: 1st Choice _____ 2nd Choice _____ 3rd Choice _____

This statement should be signed by parent/guardian for minor players. We agree that I and the registrant will abide by the rules of the EPYSA, and its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the EPYSA accepting the registration for its soccer programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify the EPYSA, its affiliated organizations and sponsors, their employees and associated personnel, including owners of fields and facilities utilized for the Programs, against any claims by or on behalf of the registrant as a result of the registrant's participation in the Programs, and/or being transported to or from the same, which transportation I hereby authorize.

We agree that I and the registrant understand and acknowledge the WVSA may publish photos on its website or social media page. By signing this document you are granting rights to the WVSA to use any/all media (including photos/movies) of a player while they were engaged in WVSA activities. (THIS ALSO INCLUDES TEAM PHOTOS) unless circled **NO** here.

Parent/Guardian Signature: _____

Date: _____