



**Mountain United Soccer Association**  
**FALL 2010 PLAYER REGISTRATION FORM**  
**GEORGIA YOUTH SOCCER ASSOCIATION**



Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
 Email: \_\_\_\_\_ Zip \_\_\_\_\_  
 Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Male: \_\_\_ Female: \_\_\_ Shirt Size: YS \_\_\_ YM \_\_\_ YL \_\_\_ AS \_\_\_ AM \_\_\_ AL \_\_\_ AXL \_\_\_

**PLAYER AGE AS OF AUGUST 1, 2010 IS \_\_\_\_\_**

I hereby give approval for the participation of my child in any and all GSSA and affiliated Associations or league activities and I assume all risk and hazards incident to such participation, including transportation to and from said activities, waive, release, absolve, indemnify and agree to hold harmless the GSSA and affiliated association league, the organizers, supervisors, officers, directors, participants, and persons or parents supervising or transporting participants to or from such activities from any claims arising out of injury to my child. I understand that a player who registers with an affiliated league is bound to that league for the entire seasonal year, unless a transfer is requested for extenuating circumstances.

By Signing this form I agree to adhere to the Policies and Procedures set forth by the league. I further understand that dismissal may result from league activities for failure to adhere to such Policies and Procedures.

**FORM MUST BE SIGNED**

**Parent – Guardian Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**NOTE: PLAYING AGE IS PLAYER'S AGE ON AUGUST 1, 2010**

Additional Information

# Seasons Played: \_\_\_ Coach Preference: \_\_\_\_\_ Additional Comments: \_\_\_\_\_  
 Physical Problems we should know about: \_\_\_\_\_

**Parent-Guardian Information**

Father: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Occupation: \_\_\_\_\_ Bus.Phone: \_\_\_\_\_  
 Mother: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Occupation: \_\_\_\_\_ Bus.Phone: \_\_\_\_\_

**Willing to Help**

Please let us know in what way: \_\_\_\_\_

**Registration Fee**  
**(MUST ACCOMPANY REGISTRATION FORM)**  
**ALL PLAYERS \$70.00**  
**\$10.00 Late Fee after 8-31-10**

\_\_\_\_\_ I WOULD LIKE TO BE A TEAM SPONSOR (Under 6-8 \$100.00, U10-12 \$150.00)  
 \_\_\_\_\_ I WOULD LIKE TO HAVE A SPONSOR SIGN AT THE FIELDS (\$125.00)  
 \_\_\_\_\_ I WOULD LIKE TO MAKE GENERAL DONATION OF \$ \_\_\_\_\_  
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Method of Payment: \_\_\_\_\_ Total Enclosed: \_\_\_\_\_

**Make check payable to: Mountain United Soccer Association**  
**Mail to: P.O. Box 1862, Blairsville, Ga. 30514-1862**  
**Phone: 706-745-7865**



**League Use Only**

\_\_\_ Transfer \_\_\_ Dual \_\_\_ New \_\_\_ Re-Registration \_\_\_ Change/Correction AGE DIV. \_\_\_\_\_ County of Res. \_\_\_\_\_  
 Date Registration Received: \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_ Other \_\_\_\_\_

**REGISTRATION INFORMATION ON REVERSE SIDE**



**SOCCKER REGISTRATION INFORMATION  
THE MOUNTAIN UNITED SOCCER ASSOCIATION  
FALL 2010 REGISTRATION INFORMATION**

**PARENT OR GUARDIAN SIGNATURE IS REQUIRED ON THE REGISTRATION FORM**

Return the form as soon as possible. If you wish to be on a particular team, indicate the coach's name on the form. *Check with the league regarding the approved list of coaches.* **Playing age is determined by player age on August 1, 2010.** A player can play up one age group in Recreation and two age groups in Select. **You must attach a note indicating your request.** NOTE: A PLAYER CANNOT PLAY IN A YOUNGER AGE GROUP. If you want to return to the same COACH you must have your form in by 8-1-10. After this date new players and returning players will be placed on teams, based on the date the registration form is received, then request, IF POSSIBLE. **For Athena ,Academy, and Classic deadline, call the Association.**

PLAYERS WILL BE PLACED ON TEAMS BASED ON AVAILABILITY

**The season will begin the second week of September**

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**PAYMENT OF REGISTRATION FEE**

**The appropriate registration fee must accompany the registration form.  
We do not accept credit card payment or electronic payment.**

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**REFEREE COURSE .....If you are interested in becoming a referee, contact the Association**

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**COACHING**

ANYONE INTERESTED IN COACHING OR BEING AN ASSISTANT WILL NEED TO BE OR BECOME CERTIFIED. COACHES WILL BE REQUIRED TO COMPLETE A COACH APPLICATION THAT INCLUDES A BACKGROUND CHECK FOR CRIMINAL HISTORY.  
THE BOARD MUST APPROVE ALL COACHES.

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The league is affiliated with the Georgia State Soccer Association, the Georgia Youth Soccer Association, the United States Soccer Federation, and the Federation Internationale De Football Association (FIFA). The league is an independent non-profit organization.

GEORGIA STATE SOCCER ASSOCIATION HAS A WEB SITE THAT HAS INTERESTING INFORMATION AVAILABLE. IT IS [www.gasoccer.org](http://www.gasoccer.org)

The Mountain United Soccer Association email address is [smithric@windstream.net](mailto:smithric@windstream.net)

**MORE INFORMATION IS AVAILABLE ON THE MOUNTAIN UNITED SOCCER ASSOCIATION WEBSITE AT  
[www.mountainsoccer.org](http://www.mountainsoccer.org)**

**SOCCER REGISTRATION  
FOR FALL 2010  
AGES 4 THROUGH 19**



**REGISTRATION IS NOW BEING ACCEPTED**

**CONTACT  
MOUNTAIN UNITED SOCCER ASSOCIATION  
706-745-7865**

***WWW.MOUNTAINSOCCER.ORG***