



# United States Amateur Soccer Association, Inc.

Affiliated with the United States Soccer Federation

9152 Kent Avenue, Suite C-50, Lawrence, IN 46216

(317) 541-8568

## AMATEUR PLAYERS REGISTRATION FORM

A  AD

PLAYERS INSTRUCTIONS: Please complete the information requested in the shaded area, including the date and your signature in the bottom segment of the form.

Male  Female

Player's Name (Last Name First)

Player's Social Security No.

Address

Phone

City

OK

State

Zip Code

mm/dd/yy

Mo. Day Year  
Date of Birth

US Citizen  Yes  No

Intent to

become a citizen

Yes

No

Country of Birth

TEAM REPRESENTATIVE INSTRUCTIONS: Please complete the information in this segment, then sign and date the bottom segment of the form before sending to the State Registrar, enclosing the appropriate fees.

THIS AMATEUR PLAYER  
REGISTRATION FORM MAY  
BE USED AS  
"A" FORM  
(Amateur)  
or as an "AD" Form  
(Amateur Detention)

Please mark the  
appropriate box at  
the top of the page  
and below.

"AD" Form Requires  
\$30.00

Oklahoma Soccer Association

Code State Association

NEOASA

League # Current League

Team # Current Team

Players Last Team Affiliation Last Season

Team Representative Name (Last Name First)

Address

Phone

City

State

Zip Code

### RELEASE AND DISCLAIMER

Soccer is a contact sport involving risk of serious injury, disability, or death. Not all risks are foreseeable. In consideration of being allowed to participated, I agree to release, waive, and covenant not to sue United States Soccer Federation or affiliates on account in injury, death, or property damage alleged to be caused in whole or in part by affiliates' actors or omissions.

I HAVE READ THE RELEASE & DISCLAIMER AND RECOGNIZED THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING. I KNOWINGLY ASSUME THE RISK.

Player's Signature

Date

Team Representative

Date

State Registrar

Date