



Emergency Information and Consent Form

New Ulm Area Youth Soccer Association

Name of Registrant			
	First	Initial	Last
Club Name	New Ulm Area Youth Soccer Association	Team Name	

Parent/Guardian Agreement

I, the parent/guardian of the registrant, a minor, agree that the registrant and I will abide by the rules of the USYSA and MYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the USYSA and MYSA accepting the registrant for its soccer programs and activities (the "programs"), I hereby release, discharge and/or otherwise indemnify the USYSA and MYSA, NUAYSA, SMSA, MLS Soccer Camps Inc. and any affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the programs, against any claim 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.

Parent/Legal Guardian (please print your name)			
Date		Signature	

Emergency Information

<i>Who should be notified in emergency?</i>	<i>Street Address</i>	<i>Phone</i>
<i>Alternate to be notified in emergency?</i>	<i>Street Address</i>	<i>Phone</i>
<i>Physician/HMO/Clinic Name</i>	<i>Street Address</i>	<i>Phone</i>
<i>Medical Insurer</i>	<i>Medical Policy Number</i>	
<i>Dentist's Name</i>	<i>Work Phone</i>	
<i>Dental Insurer</i>	<i>Dental Policy Number</i>	
<i>List (above) any medical problems, limitations or conditions which the player may have</i>		

Consent for Medical Treatment

As the parent or legal guardian of a participant in USYSA-MYSA-NUAYSA programs, I hereby give my 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 my dependent.

Date		Signature	
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Notes:

- Adults and high school graduate players over age 18 who are not claimed as dependents by their parents may sign this form for themselves.
- This form, a portion of the MYSA individual registration form, is to be retained by each team for such use as may be required during the MYSA season
- If the player wears eyeglasses during play, lenses and frames of a type acceptable to the referee must be provided at the player's responsibility. Eyeglasses must be secured by a strap or tape. **NO JEWELRY OF ANY KIND WILL BE ALLOWED during practice or play.**