

# Illinois Women's Soccer League

PO Box 68849, Schaumburg, IL 60168

[www.iwsl.com](http://www.iwsl.com)

## PLAYER REGISTRATION FORM

For The Playing Year 2018-2019

CLUB NAME: \_\_\_\_\_

TEAM NAME: \_\_\_\_\_ TEAM AGE: \_\_\_\_\_

PLAYER'S FIRST NAME \_\_\_\_\_ LAST NAME: \_\_\_\_\_

PLAYER'S ADDRESS \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PLAYER'S PHONE \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

PLAYER'S BIRTHDATE \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

PROOF OF AGE:

PREVIOUS SEASON IWSL PASS ID # \_\_\_\_\_

Or

PROOF OF AGE PROVIDED: GOVERNMENT ISSUED BIRTH CERT or PASSPORT  
(Circle one)

By signing this document I have indicated that I (or my child) has not registered with any other IYSA registered team for the above indicated playing year and is committed to play for only this team. I am aware that IWSL league rules only permit transfers if desired to other clubs during or after the month of January with an applicable release obtained by January 31<sup>st</sup> and submitted per league rules.

PLAYER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PARENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

CLUB/COACH SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

(This form is to be kept on file by the club for the entire playing year indicated)