





Season: Fall / Spring: _____

STSA TRAVEL REGISTRATION FORM

Saginaw Township Soccer Association Saginaw, MI 48603

<u>Player information</u>	
Player's Name:	Date of Birth:
Address:	Sex: Male Female (circle one)
	School:
Parent(s) Name(s):	Phone:
Email address:	Alternate Phone:
Volunteer Opportunities (Please volunteer for o	one or more areas):
I am interested in participating with my child in the f	following position(s):
☐ Field Marshall ☐ To	ournament Volunteer
Waiver, Release, and Indemnification	
result of any injury occurring to said child while participati and hold harmless the STSA, and all other persons mentio resulting from any injuries or damages allegedly incurred abide by the rules and regulations of the STSA, the Michig Association and the United States Soccer Federation.	lamages, or lawsuits for damages, or any other claim which may arise a ting in the program. I further understand that I am agreeing to indemnioned above, from all claims which may be made by or on behalf of my while participating in any STSA activities. I/We further agree that we want gan State Youth Soccer Association, the United States Youth Soccer
Parent/Guardian's Signature	Date:
STSA Travel Fees for all leagues is \$3	350.00 Wolves Hawks Saginaw Fees are \$800.00
Fees cover field and grounds upkeep, insurance through MSY	SYSA, referee fees, league fees, Coerver training, and speed & agility training.
Uniforms are not covered in this fee. UNIFORMS WI	ILL BE ORDERED ON-LINE — ASK YOUR COACH FOR DETAILS!
Any registration fees/forms submitted AFTER the post	sted registration due date will be assessed a \$25 per player late fe
	nly * * * * * Do not write below this line — for STSA use only * * *
ees Paid \$ Check #	Date:
EAM NAME:	COACH: