



TRAVEL PLAYER REGISTRATION
Golden Isles Soccer Association
Fall 2008

FEES: \$180 per season plus Uniform

For Office Use ONLY
 Number: _____
 Paymt Type: _____
 Amount : _____
 Age Group: _____
 Coach: _____
 Eval#: _____

Online Registration Available at www.goldenislesoccer.com

Household Name: _____
 Address _____
 City _____ ST _____ Zip _____
 Email Address: _____

Emergency Contact

Name: _____
 Phone: _____
 Relationship: _____

Parent (s) / Guardian -

Name: _____
 Home Phone: _____
 Work Phone: _____
 Cell Phone: _____
 E-Mail # 2: _____

Player Information -

First Name _____
 Last Name: _____
 Date of Birth: ____ / ____ / ____
 Age Group: (please look at chart on other side of page)
 I am an U— _____ player Male Female
 Grade: _____ School: _____
 Team and Coach in the Fall: _____
 # of Season's Played _____ New Player _____

Medical Information

Doctor Name: _____
 Allergies or medical conditions: _____
 Ins. Co: _____
 Policy #: _____

**Check payable to "GISA Travel" and must be received by June 11th at:
 P.O Box 21752, St. Simons Island, GA, 31522**

Golden Isles UNITED Uniform Information & Policy
 Once you have been selected to participate for the Golden Isles United, you will be required to purchase our club / team uniform set (if necessary). This set includes our home and away Nike Brazilla, moisture management/dry fit home and away jersey (total of 2), two (2) pair of NIKE shorts and two (2) pair of NIKE socks. Cost of this set: \$125.00. Uniforms are handled through Lloyd's Soccer and are linked to our website. Team managers typically process orders for their team. Finally, please complete uniform size chart below:

Please circle
 JERSEY SIZE SHORT SIZE
 AS AM AL AXL YL AS AM AL AXL

MEDICAL RELEASE & PARENT CONSENT WAIVER— *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 ,Golden Isles Soccer Association 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.*
 Parent/Guardian Signature: _____
 Date _____

Year of Play	Age Group Division	Date of Birth Players Born
U-09 Girls& Boys		8/1/1999 and younger
U-10 Girls & Boys		8/1/1998 and younger
U-11 Girls & Boys		8/1/1997 and younger
U-12 Girls & Boys		8/1/1996 and younger
U-13 Girls & Boys		8/1/1995 and younger
U-14 Girls & Boys		8/1/1994 and younger
U-15 Girls & Boys		8/1/1993 and younger
U-16 Girls & Boys		8/1/1992 and younger
U-17 Girls & Boys		8/1/1991 and younger
U-18 Girls & Boys		8/1/1990 and younger
U-19 Girls & Boys		8/1/1989 and younger