

# West Des Moines Soccer Club Select Team Registration



Player's Name: \_\_\_\_\_ Mom's Date of Birth \_\_\_\_\_  
(Month & Day only)

Please circle one: Male or Female      Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_      Age as of 8/1/2011: \_\_\_\_\_

School Attending: \_\_\_\_\_      Grade in the Fall 2011: \_\_\_\_\_

**\*If you are new to the WDMSC, a copy of the player's state certified birth certificate is required.**

## Fall 2011 Selection (Circle):

- 1) Coed or Girls
- 2) U11 U12 U13 U14 U15 U16 U17 U18 U19

**Registration Fee:** \$95

\$10 Discount on 2<sup>nd</sup> and additional siblings

**Primary Guardian Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Secondary Guardian Name:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Total for this player: \_\_\_\_\_

Please mail this completed form, your bid acceptance, payment plan paperwork (if applicable) and appropriate payments to:

**West Des Moines Soccer Club  
P.O. Box 27008  
West Des Moines, IA 50265**

\*You may be required to participate in a Club fundraiser at the beginning of the season.

Visit [www.wdmsoccerclub.org](http://www.wdmsoccerclub.org) for information on bids and fees or e-mail [wadmin@wdmsoccerclub.org](mailto:wadmin@wdmsoccerclub.org) with questions.

I hereby consent for my child to participate in and abide by all the rules and Codes of Conduct of West Des Moines Soccer Club and the Iowa Premier Soccer League. As parents or guardians of the above child, we acknowledge that there is risk of injury with all recreation, and in consideration of said child being allowed to participate in the West Des Moines Soccer Club, we assume all risk of injury to the child and hereby agree to indemnify and hold harmless the West Des Moines Soccer Club and its agents, directors and employees from any claims, demands or liability arising from said child's participation in the West Des Moines Soccer Club. We as a family agree to abide by the West Des Moines Player and Parent Code of Conduct.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\* Please note that in addition to this registration form, you need to return your bid acceptance form and appropriate fees. If you are including this registration form with your select acceptance form and fees, feel free to write one check.