

NORTHERN ILLINOIS SOCCER LEAGUE

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30 YEARS OF EXPERIENCE IN ADMINISTRATION & DEVELOPMENT OF COMPETITIVE YOUTH SOCCER WE PROVIDE THE BEST SERVICE TO THE BEST ORGANIZATIONS

★ PLAYER REGISTRATION FORM ★

□ NEW PLAYER	□ RETURN	IING PLAYER					
B NAME:							
DIVISION:							
GENDER OF TEAM:	☐ MALE	C	□ FEMAL	E			
DI AVEDO DEGICEDATION ID #							
PLAYERS REGISTRATION ID #:							
PLAYERS FIRST NAME:							
PLAYERS LAST NAME:							
PLAYERS ADDRESS:							
CITY:					ZIP:		
PLAYERS PHONE NUMBER:							
BIRTHDATE: / /		GENDER	·	MALE	□ FE	MALE	
PLAYERS EMAIL ADDRESS: ———							
FATHER		MOTHER					
FATHER NAME:							
		NAME: ——					
NAME:		NAME: ————————————————————————————————————					
NAME: ————————————————————————————————————		NAME: ————————————————————————————————————					
NAME: PHONE:		NAME: PHONE: EMAIL:					
NAME: PHONE:	□ PREVIO	NAME: PHONE: EMAIL:					
NAME: PHONE:	□ PREVIO	NAME: ————————————————————————————————————	LOSED				
NAME: PHONE: EMAIL: PROOF OF AGE PROVIDED THIS PLAYER IS NOT REGISTERE	PREVION PASS NI	NAME: ————————————————————————————————————	LOSED OCCER R	EGISTERE	D TEAM /	CLUB	
NAME: PHONE: EMAIL: PROOF OF AGE PROVIDED THIS PLAYER IS NOT REGISTERE THIS PLAYING YEAR I UNDERSTAND THAT BY SIGNING T	PREVIOUS PASS NI PASS	NAME: ————————————————————————————————————	LOSED OCCER R IS OBLIGORATINE	EGISTERE	D TEAM / O	CLUB	THIS TE
NAME: PHONE: EMAIL: PROOF OF AGE PROVIDED THIS PLAYER IS NOT REGISTERE THIS PLAYING YEAR I UNDERSTAND THAT BY SIGNING TUNTIL AN APPLICABLE RELEASE FOR	PREVIOUS PASS NI PASS	NAME: ————————————————————————————————————	LOSED OCCER R IS OBLIGORATINE	EGISTERE	D TEAM / OPLAY FOR	CLUB	THIS TE