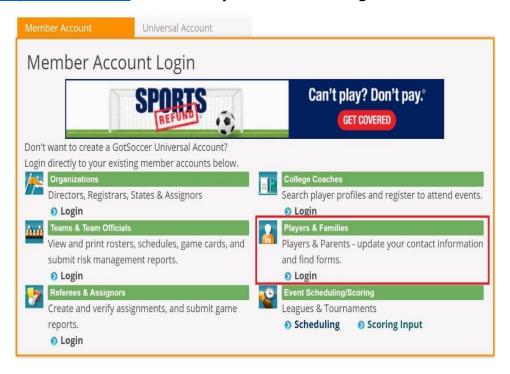
How to Retrieve Your Pre-Printed Academy Form

1. www.tylersoccer.com Click on Players & Families Login.



2. Login to Player Account. Username & Password.

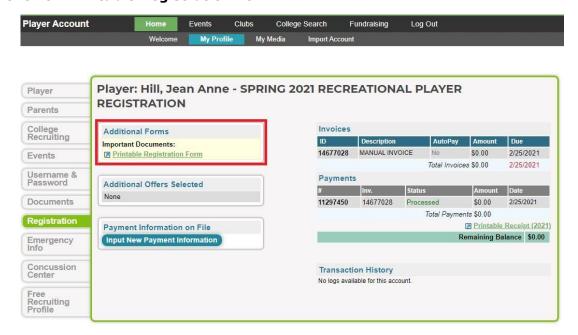


How to Retrieve Your Pre-Printed Academy Form

3. Click on Details.



4. Click on Printable Registration Form



How to Retrieve Your Pre-Printed Academy Form

5. Parent will need to sign and return to the registrar to sign.



NORTH TEXAS STATE SOCCER ASSOCIATION



SOCCER TIGNITING PASSION FOR THE GAME	COCOED				ER REGISTRATION FORM evised 2/1/16			US YOUTH SOCCEA		
		FOR ASSOC	CIATIO	V/LEAGUE (ISE ONLY		J II.			
Academy Age: U07	U08 U09	U10	Playe	er Registratio	n#: 09013137981					
Verified Birth Certificate Yes N	o Date Paid			Reg. Fee		Cash CC	Check #			
MEMBER ASSOCIATION T	yler SA			Water Street			Mark College to State Co.			
Registrar Phone 903-279-7921	20			Registrar E	mail reba@tylerso	ccer.com				
Registrar Signature ———						— Date	2/25/2021			
Player Information: New Player	Returning Player	Gender	F	8	Submitted:	2/25/2021		Fall X	Spring	
Jean Anne	Hill			1	/1/2017					
Player First Name Player Last Name				Player DOB (MM/DD/YYYY)						
3613 Colgate Ave.				Tyler	TX		75701			
Street Address				City	State		Zip			
Oli CCI / Iddi CSS				Oity	Ottate		Lib			
Parent/Guardian #1 Name				Best Conta	act Phone			Email		
Parent/Guardian #2 Name				Best Conta	act Phone			Email		
Physicians contact information										
List any medical conditions coact	h should be aware of.									
Emergency Contact (name, phor	ne)									
Important Registration Informat This form must be filled out completely and L North Texas Member Association, and so member association. A copy of player's Glinh available at all training and competitions for in Academy play is in addition to recreasionally in participate on an Academy team. Players mu Academies as they like as long as the Socce recreational soccer registration fees. Soccer enter NTSSA sanctioned tournaments unless and may only play for one team in a tournam include suspension from all soccer activities teams at any time.	EGIBLY with all signatures to jurie a Member Association in Certificate is required at time on naurance purposes. No formal ay. Players may join any Soco ist present a form of proof of re r Academy is recognized by a Academy teams are not consider the tournament has specified ent. Violation of this rule shall in the commence of this rule shall in the shall in the control of the shall in the commence of the shall in the control of the shall in the control of the shall in the control of the shall in the control of the shall in the control of the shall in the control of the shall in the control of th	registration nur of registration. The contract or writh er Academy of the gistration signed North Texas Soci dered "registered a "Socoer Acaderesult in sanction	mber, Pla his form is en commi neir choos d by a mei coer Memi d teams," emy" brac n against t	yers may or may required for play tment may be sig ing within their a mber association per Youth Associa therefore do ket. In that event he offending pari	not be on a recreational terparticipation in any NT ned by or on behalf of the gegroup, and are not requition. The Academies may not have to follow recreating players must declare why (coach, assistant coach)	eam, unless require SSA academy prog e player to commit a uired to obtain a relu- carticipate with an A y charge a fee to co- ional team formation ich Soccer Academ manager, parent, 4	d to be on a recoram or tournamer player to an aca ease from their N cademy. Players wer expenses in a n rules. Soccer A y team they will go or other team rep	eational team I nt. This form m demy team. So TSSA recreation may join as m addition to the cademy teams play with in the resentative), w	by their nust be occer onal team any Socce player's may not tourname which could	
Parental Approval and Medical RECOGNIZING THE POSSIBILITY OF PHY UNITED STATES SOCCER FEDERATION. REGISTRANT FOR ITS SOCCER PROGRASPONSORS, EMPLOYEES AND ASSOCIATOR THE REGISTRANT AS A RESULT OF THE REFEBY AUTHORIZE BY MY SIGNATURE SPECIFIC ISSUE, CONDITION, OR ALLMENTRAINER AND IOR DOCTOR OF MEDICINIFICATION OF MEDICAL INVENSES IN PRINITED, BROADCAST AND "PROGRAMS". Yes No	SICAL INJURY ASSOCIATED UNITED STATES YOUTH SO MS AND ACTIVITIES (THE "P TED PERSONNEL, INCLUDIN- HE REGISTRANTS PARTICIP, BELOW, I CONFIRM THAT M HT THAT MY CHILD HAS OR THE E OR DENTISTRY PROVIDE IN E OR DENTISTRY ENDING THE ATMENT OF THE E OR DENTISTRY ENDING THE ENDING THE E OR DENTISTRY PROVIDE E OR DENTISTRY ENDING THE E OR DEN	G THE OWNER: ATION IN THE " IY SON/DAUGH FHAT MAY IMPA MY SON/DAUGH	S OF FIE PROGAN TER IS P ICT MY C HTER WIT	LDS AND FACILI IS" AND/OR BEIT HYSICALLY CAF HILD'S PARTICIF TH MEDICAL AS:	TIES UTILIZED FOR THE NG TRANSPORTED TO (ABLE OF PARTICIPATIN PATION IN THE PROGRA BISTANCE AND/OR TRE BEDETIES" THE BIGHT BEDETIES THE BIGHT	E "PROGRAMS" AG DR FROM THE SAM G IN THE "PROGR MS. I HEREBY GIV ATMENT AND AGR TO USE THE PLAY	IAINST ANY CLA ME, WHICH TRAI AMS". I HAVE NI ME CONSENT TO EE TO BE RESP MERS NAME PIC	IM BY OR ON NSPORTATION OTED ABOVE HAVE AN ATIONSIBLE FIN	BEHALF N I , ANY HLETIC ANCIALL OR	
Signature of Parent/Legal Guard	ian						Date			