



PLAYER REGISTRATION

2025-2026 SEASON

Please fill out form and show a:
 Copy of Birth Certificate or Passport
 Copy of Utility Bill (*proof of CS residency*)

*Payment: Credit Card, Cash or Check made payable to **C.S.Y.S.** for:
 U6-U8: \$140, U10-U12-U14-U15: \$165, U16-20U: \$180 (Non-resident surcharge: \$58.98)

CSYS VERIFICATION

DATE OF BIRTH
 ADDRESS / CITY
 PHONE
 EMAIL

\$58.98 SURCHARGE:
 (non-resident)

CS SCHOOL:

Paid by: CC / CK / CASH

Are you a: (please circle one) **New Player** **Returning Player**

NEW to CSYS? How many years of soccer or organized sports experience? _____

Played on a school team? YES NO Position played: _____

Played on a "travel" or "club" soccer team? YES NO Position played: _____

Player Last Name	Player First Name	Middle Initial
Street (Apt #)	City	Zip Code
Primary Phone #	Secondary Phone #	
Birthdate (mm-dd-yyyy)	Gender / Circle One: MALE FEMALE	
E-Mail Address (xxxxxx@xxx.xxx) - Please PRINT		
Please list any siblings/date of birth playing in league: _____		
PRINT NAME OF PARENT:		

PLEASE NOTE REFUND POLICY: A refund request will be granted until October 20, 2025 (less a \$20 Administrative fee). NO REFUND FOR ANY REASON AFTER October 20, 2025. All requests must be received by email by October 20, 2025. Email: registration@csys.org **By signing this registration form, you are agreeing to and understand our refund policy.**

PERMISSION TO PARTICIPATE: I, the parent/guardian of the registrant listed above, expressly acknowledge and agree:

- The game of soccer is a contact sport which involves a risk of bodily injury to each participant.
- To disclose any physical and/or mental condition or ailment of the registrant listed above, which may in any way increase the risk of injury to either the registrant or to other participants.
- Coral Springs Youth Soccer, Inc., reserves the right to prevent registrants from being accepted as a participant in soccer program.
- I hereby release, waive, discharge, covenant not to sue, hold harmless and agree to indemnify Coral Springs Youth Soccer, Inc. and all persons, officers, coaches and officials, including the owners of fields and facilities used for the program, from any and all liability as a result of any injuries, hurt or damages sustained by registrant as a result of his/her participation in the soccer program and/or being transported to or from the same;
- By signing this registration form you acknowledge and accept that your child may be photographed during the season and such photographs may appear on our website and/or marketing publications and are the sole property of Coral Springs Youth Soccer.
- By signing this registration form you acknowledge and accept that you may receive text messages regarding Coral Springs Youth Soccer activities.

I, the undersigned, have read and voluntarily sign the release and waiver of liability and indemnification agreement, and further agree that no oral representations statements or inducements apart from the foregoing written agreement have been made and further verify that the information on the registration form is accurate and complete.

SIGNATURE:

Parent/Guardian SIGNATURE _____