

# Tallahassee Soccer Association Membership Registration



Please type or print legibly. ❖ Fields are required for all members.

- ❖ Name: \_\_\_\_\_
- ❖ Address: \_\_\_\_\_
- ❖ City, State, Zip: \_\_\_\_\_
- ❖ Phone (primary): \_\_\_\_\_ ❖ Phone (secondary): \_\_\_\_\_
- ❖ E-Mail: \_\_\_\_\_ (you must include your email to receive TSA email)
- ❖ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ ❖ Gender:  Female  Male Years Playing Soccer: \_\_\_\_\_
- Please check here if the above information hasn't changed from last card.

## Membership Registration

Membership benefits include eligibility for season registration and participation in TSA events including weekly pick-up games. Membership is in accordance with the By-Laws of TSA and are available on the website at [www.tallahasseeoccer.net](http://www.tallahasseeoccer.net). Dues are \$40 and must be paid annually for the year beginning Sept. 1st through Aug. 31st. For new members, the dues are \$45. Current members are charged a \$5 late fee if membership is not renewed prior to Sept. 30th.

- New Member \$45 -  **Please check the appropriate box.**
- Renewing Member Before Sept 30th \$40 -  Failure to check the appropriate box,
- Renewing Member After Sept 30th \$45 -  failure to include payment with form or failure to sign the waiver below may result in a delay in processing your registration.

## Liability Waiver

I recognize that soccer is a contact sport, and, even though the TSA philosophy of play is recreational, there is always the possibility of physical injury. Knowing that this possibility exists, I am still willing to participate in TSA sponsored play.

I will not hold liable the Tallahassee Soccer Association, its Directors or Officers, the City of Tallahassee, the Manager of the Meadows Soccer Complex, the United States Soccer Federation or any of its affiliates, or any agent of any of the foregoing, for any injuries I sustain. I have read, or had explained to me, the TSA Rules of Play (which can be found at [www.tallahasseeoccer.net](http://www.tallahasseeoccer.net)) and am willing to abide by this recreational philosophy, or accept the sanction that may be imposed on me by TSA.

❖ Player Signature: \_\_\_\_\_ ❖ Date: \_\_\_\_\_

Mail this form along with payment to:  
Tallahassee Soccer Association, Inc.  
P.O. Box 13026  
Tallahassee, Florida 32317

If you have any questions contact us at:  
[www.tallahasseeoccer.net](http://www.tallahasseeoccer.net)  
or  
[tsasoccer@yahoo.com](mailto:tsasoccer@yahoo.com)

## Board/Registrar Use

Payment Received Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ By: \_\_\_\_\_

Money Order  Check Number: \_\_\_\_\_ Amount: \_\_\_\_\_ Check Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Payment Notes: \_\_\_\_\_ Version: 2.8 - 09/01/2010