



# NORTHERNMOST ARCTIC SOCCER LEAGUE

## TEAM REGISTRATION FORM

*The mission of NASL is to provide an opportunity for year round soccer to help improve players' overall soccer skills. The league will provide an atmosphere that is fun, competitive and promotes fair play.*

### RELEASE AND DISCLAIMER

Soccer is a contact sport involving risk of serious injury, disability, or death. Not all risks are foreseeable. In consideration of being allowed to participate, I agree to release, waive, and covenant not to sue the Northernmost Arctic Soccer League ("NASL") or the Fairbanks North Star Borough School District on account of injury, death, or property damage alleged to be caused in whole or part by affiliates' actions or omissions. Our goal is to reduce or eliminate as many risks as reasonably possible to provide a safe program. We ask for your full cooperation in following instructions regarding proper conduct, proper use of equipment and facilities, and adherence to the rules of indoor soccer as established by the league. Participants are responsible for the cost of any injury, therefore, you are encouraged and recommended to have adequate health insurance. Insurance provided through AASA membership is secondary to any insurance held by the player.

### LEAGUE POLICIES

- **Eligibility:** All women must be 18+ years of age, no exceptions.
- **Fee payment:** All fees are to be paid in full by the individual or Team Contact/Captain at the time of registration. The league assumes no responsibility for collecting fees from players registered with a group after registration is complete.
- **Late Registration:** Players who wish to register after the deadline may do so in person, by completing a paper registration form and submitting the fee. There is no late fee associated with late registration, but a space on a roster will not be guaranteed. In the event that a player is not placed on a team, a full refund will be made.
- **Refunds:** Fees are non-refundable, except in the case of late-registering players who are not placed on a team.
- **Bleeding:** Bleeding or an open wound will result in stoppage of play and a substitution of player(s) until the injury is covered or no longer bleeding.
- **Uniform:** Matching team jerseys (to be provided by sponsor) and shin guards are required. No jewelry (including watches, earrings, bracelets, necklaces, etc.) may be worn during games. Indoor soccer shoes are recommended, but not required.
- **Sportsmanship:** Unsportsmanlike conduct will not be tolerated. A participant may be ejected at anytime for unsportsmanlike conduct.
- **Referees:** Rules are enforced by the referee, and all decisions are final.
- **Goals:** Goals must be brought in by the players before the first game of the evening, and put away by the players at the end of the last game. Goals are stored outside between the storage buildings; please nest them in the "alley" between the two storage buildings.
- **Cold-weather cancellation:** We go by the current temp on the airport weather recording (458-3745, then hit 1-1-1-3). If in doubt, call; we'll play if it's -35F or warmer at 6:00pm.

I, the undersigned, do hereby acknowledge by signing below, that I do not hold the league or its associations (including the Fairbanks North Star Borough) liable or responsible for any injuries as in the "Release and Disclaimer" as stated above. I also understand and will abide by the aforementioned league policies. I HAVE READ THE RELEASE AND DISCLAIMER AND LEAGUE POLICIES ABOVE AND RECOGNIZE THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING. I KNOWINGLY ASSUME THE RISK.

Team Name/Sponsor (if known): \_\_\_\_\_ Shirt Color (if known) \_\_\_\_\_

<u>Name (print)</u>	<u>Signature</u>	<u>Name (print)</u>	<u>Signature</u>
1. _____	_____	7. _____	_____
2. _____	_____	8. _____	_____
3. _____	_____	9. _____	_____
4. _____	_____	10. _____	_____
5. _____	_____	11. _____	_____
6. _____	_____	12. _____	_____

*If you choose to have more than 12 players on your roster, attach signatures on a separate sheet of paper.*

*Complete all pages, and mail the entire form to:*

*Northernmost Arctic Soccer League, PO Box 81005, Fairbanks 99708*

Team Name/Sponsor (if known): \_\_\_\_\_ Shirt Color (if known) \_\_\_\_\_

**PLAYER 1 (TEAM CAPTAIN)**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

**PLAYER 2**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

**PLAYER 3**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

**PLAYER 4**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

**PLAYER 5**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

**PLAYER 6**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

**PLAYER 7**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

**PLAYER 8**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

**PLAYER 9**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

**PLAYER 10**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

**PLAYER 11**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

**PLAYER 12**

Name \_\_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Home/Eve Phone \_\_\_\_\_ Work/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

***If you choose to have more than 12 players on your roster,  
please submit a separate form.***