



NPC SOCCER REGISTRATION FORM

PLAYER INFORMATION:

First Name: _____ Last Name: _____

Gender: Male Female Age: _____ DOB: _____

Current Club/League/Team Name: (*Indicate Travel/Rec*): _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____ Secondary Phone: _____

E-Mail Address: _____

TRAINING PROGRAM:

Training Program: _____ Time: _____

Location: _____ Cost: _____

Soccer Position(s): _____

There are a limited number of spaces available in these camps and training sessions. Players will be accepted on a first paid, first served basis. Completed registration forms and payment in full, are required to secure a spot.

Make checks payable to Paul Ngend
Mail completed forms and payment to:
Paul Ngend
P.O. Box 15101, Alexandria, VA 22309

For more information, call 540-593-3721

LIABILITY RELEASE:

Soccer is a physical sport. As the parent or guardian of the player attending this camp, I understand that the programs, activities, games, and training methods used are hazardous by nature and I assume all risks of injuries arising from my child's participation. I release, indemnify, and hold harmless NPC Soccer and associates from any claim, suit, demand, or action arising in connection with my child's participation.

I understand that I am responsible for any property damage caused by my child. If a player's property is lost or stolen, NPC Soccer will make every attempt to locate it. However, NPC Soccer accepts no responsibility for the loss of or damage to any player's property.

SIGNATURE OF PARENT OR GUARDIAN: _____