

**** UNITED STATES SPORTS & FITNESS ASSN. - Membership Card Application ****

PRINT ONLY PLEASE

| | | | | | |
|--------------------------|-----|----------------|---------------------|---|--|
| Date of Birth | Age | Sex | Date of Application | USSFA 6801 S. Gray Road, Suite F Indianapolis, IN 46237 | |
| First Name | | Middle Initial | Last Name | | |
| Street (Mailing) Address | | | | Sport Code SO | |
| City | | State | Zip Code | | |
| Area Code / Phone Number | | | | | |

Club / Team Represented: Middle Tennessee FIRE Soccer **Head Coach Name:** Diego Figueroa

I understand that my participation in USSFA activities involves risks and dangers of serious and permanent bodily injury and death. I, or my parents / guardian if I am a minor, hereby release, hold harmless, discharge and agree not to sue USSFA , its Club / Teams, Directors, Officers, Employees, Coaches, Officials, Volunteers, Owners / Lessors of Premises for all liability from my participation in these and any other USSFA related travel, lodging, social / recreational activities.

Applicant's Signature:

Coach: _____

(For Athlete's Membership)

Parent/Guardian: _____

Must have Athlete's Parent / Guardian Signature