



Columbus Soccer Organization
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Suite #4
Columbus, MS 39701

CONTACT US
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columbusmsoccer.org

CSO Rec Soccer Registration Form

Fees By Birth Year
2015-2019 (\$35.00)
2014-Older (\$55.00)

PLAYER INFORMATION

DATE:

PLAYER NAME

DATE OF BIRTH

GENDER ☐ Male ☐ Female

SHIRT SIZE: YS YM YL AS AM AL AXL SHORT SIZE: YS YM YL AS AM AL AXL SOCK SIZE: S M L

GUARDIAN 1 NAME

Email

GUARDIAN 2 NAME

Email

BIRTH CERTIFICATE NUMBER

EMERGENCY CONTACT

PHONE #

PLEASE LIST ANY MENTAL OR HEALTH CONDITIONS WE SHOULD KNOW ABOUT YOUR PLAYER

Special Requests:

CONTACT INFORMATION

ADDRESS

CITY

STATE

ZIP CODE

PHONE #

CELL #

E - MAIL

I, the parent or guardian of the above named player hereby give my approval for participation in CSO recreational soccer. I assume all risks and hazards to such participation. I do hereby waive, release, absolve, indemnify and agree to hold harmless CSO and its board of directors, sponsors, supervisors, other participants, and organizers, for any claim arising out of an injury to my participant in recreational soccer. Insurance coverage is the sole responsibility of participant parent or guardian. My participant has my permission to receive emergency medical treatment. My participant also has my permission to be photographed or filmed during CSO activities for promotional purposes for the organization. **Any special requests must be made in writing at the time of registration. Additional information and requests may only be made on the registration form. CSO will not field calls or e-mails with special requests after registration is complete. Please note: absolutely no player will be moved after rosters have been completed.**

1. Refunds can only be provided for the registration fee. Therefore, the maximum amount of the request can not exceed the registration for a particular playing year. All requests must be in writing. 2. There are no refunds of fees of online processing fees or other expenses. 3. Refunds will not be given if the request comes after the roster for the team has been set and finalized in either.

☐ I acknowledge that I am aware of other CSO policies can be found at columbusmsoccer.org

I WOULD LIKE TO: ☐ HEAD COACH ☐ ASST. COACH ☐ SPONSOR THE LEAGUE

SIGNATURE: