



**YUKON SOCCER ASSOCIATION**  
4061 – 4<sup>th</sup> Avenue, Whitehorse, Yukon Y1A 1H1  
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WESTERN CANADA SUMMER GAMES 2011

I.D. Camp Registration Form

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ P. CODE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

DATE OF BIRTH: month: \_\_\_\_\_ day: \_\_\_\_\_ year: \_\_\_\_\_

LENGTH OF TIME LIVED IN THE YUKON \_\_\_\_\_

YEARS PLAYED SOCCER: \_\_\_\_\_

ANY MEDICAL/PHYSICAL CONCERNS THE COACHES SHOULD KNOW ABOUT:

\_\_\_\_\_  
\_\_\_\_\_

PARENTS NAMES: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

PARENTS EMAIL ADDRESS: \_\_\_\_\_

I, the undersigned hereby absolve Yukon Soccer Association and any persons officially connected with the 2011 Western Canada Summer Games I.D. Camps of any liability for injury or damages whatsoever arising from my participation in the tryouts. I am not aware of any illness or disability, which should prevent me from participating in these tryouts.

\_\_\_\_\_  
Participant signature

\_\_\_\_\_  
Parent/Guardian signature