



**2025 -2026**  
**MANDATORY YOUTH**  
**REGISTRATION & WAIVER FORM**



+1-242-357-9263



sds.bahamas@yahoo.com



WesternWarriorsFootball

Player full name:		
Player nationality:	Player date of birth:	
Player telephone no:	Player house location/address:	
Parents / Guardians / Other Responsible Adults		
Name(s)	Relationship	Mobile Telephone No.
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____
*Email addresses for team updates (list <b>as many as needed</b> including player's)		
School currently attended & grade:		
Family doctor or clinic ( <b>name</b> and <b>phone no.</b> ):		
Any illness, medications or allergies?		
Medical insurance carrier and policy no, if any.		

**EVERY PLAYER must send CURRENT IMAGES of:**

- (1) Player's face (***take picture with cell phone against a white wall***)
- (2) VALID ID document such as a passport or birth certificate

**Send via WhatsApp PM to +1-242-357-9263.**

*Players are to provide their own solid black athletic shorts, shin pads, and cleats. Training tops and match uniforms are provided by the Club.*

*We post training and competition updates in our WhatsApp groups. Please make sure you are in the right group to receive timely info, and get in touch if your information changes.*

*While the Club does its best to provide a safe and wholesome environment, **please be aware that all sports activities carry an inherent risk factor, and therefore the Western Warriors Football Club's coaches, managers, administrators, sponsors, drivers, volunteers and other players accept NO LIABILITY FOR ANY INJURIES, DEATH, LOST EQUIPMENT, etc. We do NOT have medical insurance for our players.***

*By signing below, I provide permission for my child to participate in the 2025-2026 youth football program with Western Warriors FC, and furthermore acknowledge the risks involved with participating in training, matches and riding the team bus (if applicable), and hereby waive any claims whatsoever against the Club and its coaches, managers, administrators, sponsors, drivers, volunteers and other players.*

\_\_\_\_\_  
(name of parent or guardian)

\_\_\_\_\_  
(signature of parent or guardian)

\_\_\_\_\_  
(date)

**PLAYERS WILL NOT BE PERMITTED TO PARTICIPATE IN TRAINING OR MATCHES UNLESS THIS FORM HAS BEEN SUBMITTED**

