

### Atlas South California Soccer League 2026 Registration Form

Atlas South California Soccer League is hosting Spring League,  
March – June on Saturdays and Sundays  
in San Juan Capistrano California.

#### Individual Player Registration

Registration is available for Boys & Girls 2011-2022

League play dates March – June

INDIVIDUAL PLAYER SIGN UP \$30.00

Referees' fees and uniforms are not included

**Please make cashier checks or money order payable to  
Atlas South California  
Deadline March 10, 2026**

Player Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Parent/Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

#### TEAM INFORMATION

Team Name: \_\_\_\_\_ Level: \_\_\_\_\_

Coach Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

#### GENERAL INFORMATION:

**Registration:** Registration is accepted on a first come, first served basis. Receipt of payment will reserve a place in the activity.

Some activities have space limits. Register early to ensure your space.

**Payment by cashier check or money order:** Payable to: **Atlas South California**

Mail to: **Atlas South California** 31584 Calle La Purisima San Juan Capistrano CA 92675

**Payment by Zelle:** Juan Castillon (949) 350-4808

**Discount:** First 6 teams to register will receive \$100 discount.

**Deadline:** March 10, 2026

**Cancellation:** Cancellation of activity may occur due to low enrollment, weather conditions, or circumstances beyond our control. Registered participants will be notified of cancellation.

**Refunds:** Participants will receive a total fee refund if Atlas South California cancels or postpones an activity, or when a participant cancels before first season game. Participants who do not show up without notification will not be given refunds.

There are no refunds after the first official game

**Parent responsibilities:** Parents are responsible for the child's supervision at all times. Transportation is not provided, unless otherwise noted.

**Photos:** Activity participants may be photographed for promotional purposes related to Atlas South California. If you do not wish for you/your child to be photographed, please provide a written note.

**Fundraising:** Fundraising is available for those participants with financial need. Please contact your assigned coach and/or Team Admin for Fundraising Information.

**WAIVER:** I hereby acknowledge that I understand that in all activities of the **Atlas South California League** there are risks of accidents that could result in bodily harm. I understand that the Atlas South California League activities are planned with the utmost thought and prudence, and with the safety of participants in mind. I further acknowledge that I/my child has the physical capacity reasonably necessary to engage in the activity for which I/my child have registered for. However, I/my child does hereby waive all claims which I/my child might have against the Atlas South California League, Atlas South California Facilities, City of San Juan or any of its officers, agents, or employees by reason of bodily injuries which I/my child might suffer arising out of my/my child's participation in the program. In case of emergency, accident or illness, I give my permission for me/my child to be treated by a professional medical person and admitted to a hospital if necessary. I agree to be the party responsible for all medical expenses which are incurred in my/my child's behalf.

Participant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

31584 CALLE LA PURISIMA SAN JUAN CAPISTRANO CA 92675 (949) 350-4808  
ATLASCAPISTRANO@YAHOO.COM