

Soccer Registration Form Fall Season 2010 (no spring season)

(Please note quick deadline of August 27th!!)

South Shore Soccer Association (www.southshore.com/soccoming.htm)

P.O. Box 656 -- Flippin, AR 72634 -- Phone (870) 421-3251 rleonard@claridgeproducts.com

(forms and checks can be mailed to above address or dropped off at Flippin, Cotter, or Yellville Elementary or Middle School offices by the deadline of August 27th, 2010. Most games will be in Flippin. Games will be weeknights after 5:30 and a few Saturdays.)

Player's Name _____ Date of Birth _____ Years Played _____ Sex ____M ____F

Address _____ City _____ State _____ Zip _____ Home Phone _____

Guardian 1: _____ Guardian 2: _____ Work Phone _____ Cell _____

Height _____ Weight _____ Shirt Size: YS YM YL AS AM AL Shorts: YS YM YL AS AM AL
(sizes run pretty small in the shirts)

Email Address: _____ Medical conditions: _____

Please indicate any areas which you would be willing to help the association.

____ Coach ____ Assistant/Team Manager ____ Field Maintenance ____ Sponsorship ____ Concessions ____ Other

If parents cannot be reached, please contact:

Name _____ Relationship _____ Phone# _____ Cell _____

I, the parent / guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the USYSA, its affiliated organization and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the USYSA accepting the registrant for its soccer programs and activities (the "Programs"). I hereby release, discharge, and or otherwise indemnify the USYSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of the fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and / or being transported to or from the same which transportation I hereby authorize. As the parent / legal guardian of the above named player, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions necessary to preserve the life, limb or well being of my dependent.

Signature of Parent/Guardian

Date

Do you also wish to be registered for Level 2 (travel or tournament) Soccer? _____ (yes or no) Players signing up for Level 2 soccer will be expected to pay for extra registration costs, uniforms, and possible tournament fees. These fees could range from \$20 up to \$100. Level 2 players will all be assigned to a team and the coach of that team will determine what tournaments and games their team will play in. The coach and parents can also attempt to get sponsors to cover some of their cost. Level 2 Soccer will require some travel so players need to be committed to playing if you sign up!!! Level 2 teams will be organized by the association according to ages that sign up to play.

Age group and costs:

	<u>Age Group</u>	<u>Cost</u>	<u>Benefits</u>
Born on or after August 1, 2006 -- Too young			
Born between August 1, 2004 and July 31, 2006	U6	\$25	Shirt, shorts, socks, ball, shin guards
Born between August 1, 2002 and July 31, 2004	U8	\$35	Shirt and socks
Born between August 1, 2000 and July 31 2002	U10	\$35	Shirt and socks(will play in Flippin and possibly Mtn. Home)
Born between August 1, 1998 and July 31 2000	U12	\$35	Shirt and socks(will play in Flippin and possibly Mtn. Home)
Born on or before July 31, 1998	U14	\$35	Shirt and socks(will play in Flippin, Mtn. Home and other locations)

**** Payment must be received before your child will be placed on a team and before a uniform is ordered!!**

**** Make sure Date of Birth is correct and that their first name in Player Name field is CORRECT for uniforms!**

**** Registration forms must be received by August 27th, so we can draft teams and order uniforms!**

**** Registration forms must include payment! Deduct \$10 for each additional child after the first child.**

**** You should be contacted by Sept. 3rd and games will start around Sept. 20th.**

**** Forms or payments received after August 27th deadline will be assessed a \$20 late fee!**

**** Potential coaches please sign up for clinic in Mtn. Home at www.arkansassoccer.org then coaching and clinics.**

**** Please call me (Roger Leonard) at 421-3251 to discuss any concerns.**

**** No Payment = NO Play, NO Team, and NO Uniform!!**

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