

# LEEDS YOUTH SOCCER Fall 2006 REGISTRATION FORM

Post Office Box 463

Leeds, AL 35094

WWW.LEEDSYOUTHSOCCER.COM

**Questions:** Eddie Baird 699-7359 or Allison Hall 699-7673

**Board Members:** Eddie Baird, President; Bryan Bowman Vice-President; Rebekah Christian, Secretary; Angie Glass, Treasurer; Adam McConnell, Field Marshall; Allison Hall, Registrar, Coaches Advisor, Gene Christian, Past President/ Fundraising, Marty Glass

## No registration accepted without these items.

1. A small photo for Under 9's and up only. **Under 6 and under 8's do not need a picture.**
2. A copy of the player's birth certificate for Under 10's and up only.
3. Money for registration **NO CASH PLEASE** (no uniform will be provided until registration fee is paid)

## Player's and Parents Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ last 4 digits SS#: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Circle Sex:  Male  Female Date of Birth: \_\_\_\_\_ Age on August 1, 2006 \_\_\_\_\_ Home Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work #: \_\_\_\_\_ Home #: \_\_\_\_\_ Cell \_\_\_\_\_ email \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work #: \_\_\_\_\_ Home #: \_\_\_\_\_ Cell \_\_\_\_\_ email \_\_\_\_\_

**Playing Experience:** Season's Played: \_\_\_\_\_ Last Club: \_\_\_\_\_ Coaches Name: \_\_\_\_\_

Father can help with the following (check): Coaching: \_\_\_\_\_ Team Parent: \_\_\_\_\_ Field Prep: \_\_\_\_\_ Newsletter: \_\_\_\_\_ Web Page: \_\_\_\_\_

Mother can help with the following (check): Coaching: \_\_\_\_\_ Team Parent: \_\_\_\_\_ Field Prep: \_\_\_\_\_ Newsletter: \_\_\_\_\_ Web Page: \_\_\_\_\_

## **Registration Fees and birthday Requirements:**

<u>Age Group</u>	<u>Registration Fee</u>	<u>Born on or after</u>
Under 6's	\$75.00	8/1/00
Under 8's	\$75.00	8/1/98
Under 9's	\$95.00	8/1/97
Under 10's	\$95.00	8/1/96
Under 11's	\$95.00	8/1/95
Under 12's	\$95.00	8/1/94
Under 14's	\$95.00	8/1/92
Under 16's	\$95.00	8/1/90

**NOTE: There will be no refunds after August 1, 2006 and the uniform cost will not be refunded after uniforms are ordered.**

**Uniform Fee is \$25.00 in addition to the registration fees.**

## Uniform Information (Circle appropriate Size)

**Jersey Size:** Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large Adult Extra Large

**Shorts Size:** Youth Extra Small Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large Adult Extra Large

**NAME AS TO APPEAR ON TROPHY:** \_\_\_\_\_

Paid Registration Fees with Check \_\_\_\_\_ Check Number: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

*Make check to Leeds Youth Soccer.*

**Note any medical conditions or allergies for your child:** \_\_\_\_\_

**NOTE: Read the "Rules of Conduct and Play" provided at registration or a coach can provide you a copy.**

I, the parent/Guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the USYSA, BSSL, and Leeds Youth Soccer. Recognizing the possibility of physical injury associated with soccer and in consideration for the USYSA and BSSL, accepting the registrant for its soccer programs and activities (the "program"). I hereby release, discharge and/or otherwise indemnify the USYSA and the BSSL, its affiliated associations and sponsors, their employees and the associated personnel, including the owners of 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 or legal guardian of the above named player, I hereby give consent for emergency medical care prescribed by a duly licensed doctor or medicine or doctor of dentistry. This care may be given under whatever conditions are necessary to preserve life, limb or well being of my dependent.

**How did you hear about Leeds Youth Soccer**  School handout  Newspaper  Website  other ( list) \_\_\_\_\_

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_ Print Name: \_\_\_\_\_