

LEEDS YOUTH SOCCER SPRING 2009 REGISTRATION FORM

Post Office Box 463

Leeds, AL 35094

WWW.LEEDSYOUTHSOCCER.COM

Questions: Allison Kilgore 702-4603

No registration accepted without these items.

1. A small photo for Under 10's and up only. **Under 6 do not need a picture.**
2. A copy of the player's birth certificate for Under 8'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, 2008 _____ 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:

Uniforms

<u>Age Group</u>	<u>Registration Fee</u>	<u>Born on or after</u>	<u>Item</u>	<u>Size</u>
Under 6's	\$75.00	8/1/02	Jersey	_____
Under 8's	\$85.00	8/1/00	Shorts	_____
Under 10's	\$95.00	8/1/98	Socks	_____
Under 12's	\$95.00	8/1/96		
Under 14's	\$95.00	8/1/94		
Under 16's	\$95.00	8/1/92		

NOTE: There will be no refunds after August 1, 2009 and the uniform cost will not be refunded after uniforms are ordered. Uniform Fee is \$30.00 in addition to the registration fees, uniform pieces can be purchased separately. See uniform sheet for more information.

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: _____