



YAVAPAI SOCCER LEAGUE

www.YavapaiSoccer.com

Info Line: (928) 458-7290

New! Register Online:
www.YavapaiSoccer.com

For League Use Only: REC _____ SELECT _____
 Date Rcvd.: _____ Age Division: _____ M ___ F ___
 New: _____ Complete: Y _____ N _____ BC/ Sigs/ Fees _____
 Total \$ _____
 Player Paid \$ _____ CK _____ Cash _____
 Discount \$ _____ Approved by: _____
 Scholarship \$ _____ Date: _____

FALL RECREATION LEAGUE

Registration Deadline August 15, 2009

Games: September 12 - November 14, 2009

Open to all youth ages 3 -17 from Yavapai County area.
No Tryouts Required.

REGISTRATION FEE: PeeWee: \$39.00 — includes uniform
 Ages 5-17: \$65.00 — includes uniform
 Additional Family Members: \$60 -family acct
 Late Fee: \$20 (August 16 - 22)

Please register on-line at www.YavapaiSoccer.com
If you are unable to register on-line, please visit our signups (see web).

SELECT TEAMS

Open practice registration required — ALL players are welcome! Competitive Select Teams provide the opportunity for advanced training by nationally certified and experienced coaches. Space is limited. If not chosen to play on a select team, the player will be placed on a recreational team and \$15 returned. Select teams have an extended season and often travel to the Phoenix area.

REGISTRATION FEE: \$80 — Select Players

ADDITIONAL FEES: Travel and additional costs vary by team
OPEN PRACTICE DATES: June 27, July 25, & August 15
LOCATION: Mountain Valley Park (check web for field & time)
BRING: 8 yrs old and up
 Bring water and wear playing gear including shin guards.

PARENTS—BE INVOLVED! VOLUNTEERS ARE ALWAYS WELCOME!

If you can help, please check your interest:

Coach Asst. Coach Team Parent Fundraising Referee Volunteer Board Positions

FIRST NAME _____ LAST NAME _____ DOB ____/____/____ M / F

ADDRESS _____ CITY _____ ZIP _____

YRS OF EXPERIENCE _____ HEIGHT _____ WEIGHT _____ RIGHT FOOTED _____ LEFT FOOTED _____

FATHER _____ Volunteer? Yes No How? _____

HOME PHONE _____ CELL PHONE _____ EMAIL _____

MOTHER _____ Volunteer? Yes No How? _____

HOME PHONE _____ CELL PHONE _____ EMAIL _____

EMERGENCY CONTACT NAME & PHONE _____ RELATION _____

DR. NAME & PHONE _____

MEDICAL CONDITIONS _____ 2008 YSL COACH / TEAM _____

Rules and Obligations Agreement — 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 the behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from same, which transportation I hereby authorize. I authorize the use of photographs of my child from Yavapai Soccer League events to be published or broadcast including use on related websites.

Signature : X _____ Date: _____

Consent to Medical Treatment (Minor)

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 of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of my dependent.

X _____ Date: _____
(Signature of Parent or Guardian)

CODE OF CONDUCT As a parent, coach, assistant coach, team business manager or other affiliate of my child's soccer team, I understand that I am a member of this Association, that I am responsible for complying with all of the rules and regulations of this Association and that I can be held accountable for my actions, as provided in the YSL Bylaws. I understand that it is a privilege to stand along the sidelines and watch children play the game of soccer. While watching the game I will be a role model of sportsmanship for these kids. I agree to be positive with my comments regardless of the outcome of the game. I agree to be tolerant of the officials' calls, whether I agree with them or not, and will encourage my child to do the same. I will do my best to support the referees, especially youth referees, and agree that I will not berate, threaten, curse or in any way physically or verbally abuse an official of any age. I understand that a referee is not obligated to delay the game to explain their calls to anyone. Should I have a complaint about the referee I understand there is a system in place to report the complaint and I will follow those procedures (see Coaches Manual at www.yavapaisoccer.com.) I understand that at no time during the course of the game (including injuries and fighting) will anyone—coaches, parents, substitute players or spectators - enter the field of play without the express permission of the center referee. I realize that all persons on the sideline must be at least one yard back from the touch line. I understand that the enjoyment of the kids playing the sport they love is much more important than the outcome of the game. I will encourage my child at each game to play hard, play fair, respect the referees and other officials and congratulate their opponent. I agree to try my best to make each and every soccer game, practice, scrimmage or tournament a positive experience for my child and all those around me.

SIGNATURES REQUIRED X _____
Signature of Father or Legal Guardian Date

X _____
Signature of Mother or Legal Guardian Date