



**SOUTHEASTERN STOKES YOUTH SOCCER
ASSOCIATION REGISTRATION FORM**
PO Box 1185, Walnut Cove, NC 27052

Season: Spring 2012
Deadline: Jan. 31, 2012

PLAYER INFORMATION:

Players Name: _____ **MI** _____ **Last Name:** _____
Date of Birth: _____ Male Female **# of Seasons Played:** _____
Address: _____ **Mother's Name:** _____
City: _____ **Mother's Work/Cell#** _____
State / Zip _____ **Father's Name:** _____
Email Address1: _____ **Father's Work/Cell#** _____
Email Address2: _____ *Please check the preferred contact person above*
Special Needs? _____

FEES & UNIFORM INFORMATION:

Registration Fees:	Spring 2012 <input type="checkbox"/>	\$55.00	Uniform Fee: <input type="checkbox"/>	Jersey & Socks	\$15.00
	Late Fee (applies after 1/31 deadline) <input type="checkbox"/>	\$10.00		<i>Only if needed as new or replacement</i>	

Registrations received after 1/31/12 will only be accepted if more players are needed to fill rosters & late fee will apply.

Players able to re-use the navy/green reversible jersey from prior season(s) are not required to purchase a new uniform for the upcoming season.

NOTE: League rules state that jerseys must be tucked in during games; please be certain jersey length accommodates this rule. The League makes final determination of appropriate condition of jersey and will notify parents if new jersey is needed.

Jersey Size Needed: YS YM YL AS AM AL AXL

Navy/Green jerseys and socks may be re-used for Fall 2012; please do not discard them at season's end.

Parent Participation Contract:

Copy of birth certificate is required for all new players

Having been informed of the organization of Southeastern Stokes Youth Soccer Association (SSYSA) to provide supported soccer games for our children, I/we the parents of the so-named player do hereby give my/our approval for his/her participation in any and all SSYSA activities. I/we understand the nature of the insurance coverage provided through the registration fee. However, I/we do assume all additional responsibility for hazards incurred in the conduct of the activities, transportation to and from activities, and I/we do further hereby release, absolve, indemnify, and hold harmless the SSYSA, and also the others listed hereafter: Organizers, Officers, Sponsors, Landowners permitting the use of their land for soccer activities, any and all of them. I/we also agree to furnish a birth certificate if requested by SSYSA. In case of injury to my/our child, I/we waive all claims against the organizers, sponsors, coaches or referees appointed by them. Additionally, I/we give permission for our child's first name and last initial to be published on the SSYSA website along with a photo of the child taken during team play, formal team photo, or award recognition ceremony.

I will respect the opposing team and its players and will not engage in any disrespectful conduct.

I will respect the referees and will not challenge or show opposition to their officiating.

I will respect our team coaches and abide by their direction and leadership.

If I violate any of the above provisions, I will accept the following discipline:

- | | | | |
|---|--|-------|--|
| 1 | Disrespect to player on the opposing team | | 1 game suspension |
| 2 | Ejection from game (first offense) | | 1 game suspension |
| 3 | Ejection from game (second offense) | | 1 season suspension |
| 4 | Ejection from game (third offense) | | Lifetime suspension |
| 5 | Verbal assault/hostile challenge of a referee, coach or player | | One Year suspension from attending games |
| 6 | Physical assault of referee, coach or player | | Lifetime suspension from SSYSA |

Please be aware that the SSYSA board, as well as the Discipline and Appeals committee record the offense occurrences. In the event of an ejection from the game, the parent/guardian must leave the soccer field, out of sight and sound, and cannot return until one hour after the team's next game. If the parent does not return before this time, an additional two game suspension will be incurred.

Parent Signature: _____

SIGNATURE REQUIRED

I am interested in being a: Coach Asst. Coach Board Member Concessions Volunteer

REGISTRATIONS RECEIVED WITHOUT PAYMENT WILL NOT BE VALID

If you need to make arrangements for a 1/2 and 1/2 payment plan, please see an SSYSA Board Member
"1/2 and 1/2 payment plan" is 1/2 of balance @ time of registration, 1/2 prior to first game

Payment Rec'd by: _____ Check _____ Check No. _____ Cash _____ Amt _____