

SAN JUAN SOCCER REGISTRATION FORM FOR FALL 2007 SEASON

PO Box 1310 • www.islandsoccer.org

Full Legal Name _____ **Nickname** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Birthdate ____/____/____ **Gender:** M / F **Age by July 31, 2007** _____

Mother/Guardian _____ **Home Phone** _____

Work Phone _____ **email** _____

Father/Guardian _____ **Home Phone** _____

Work Phone _____ **email** _____

Emergency Contact _____ **Phone** _____

MEDICAL INFORMATION

Physician _____ **Phone #** _____ **Medical Insurance Plan #** _____

SOCCER TEAMS AND DUES

	Before Aug. 1	Aug. 1 and later
___ U-8 co-ed (6 & 7 yr olds)	\$50	\$75
___ U-10 co-ed (8 & 9 yr olds)	\$50	\$75
___ U-12 Boys (10 & 11 yr olds)	\$50	\$75
___ U-12 Girls (10 & 11 yr olds)	\$50	\$75
___ U-13 Boys (12 yr olds)	\$75	\$100
___ U-13 Girls (12 yr olds)	\$75	\$100
___ U-14 Boys (13 yr olds)	\$75	\$100
___ U-14 Girls (13 yr olds)	\$75	\$100

The U-13 & U-14 teams' fees include Passenger ferry tickets to the off island games

Total Amount Enclosed: \$ _____ **Cash** **Check #** _____

Please mail to PO Box 1310, Friday Harbor, WA 98250 or drop off at Nash Brothers

!!!!!!!IMPORTANT INFO ON THE OTHER SIDE!!!!!!!

RELEASES

Release of all claims against San Juan Soccer: In consideration of permission granted my child/ward by San Juan Soccer to participate in soccer, I the parent or guardian of the above-named child, hereby release and discharge San Juan Soccer, its officers, representatives, coaches and referees from all claims, demands, actions, judgments, and executions which the child, parent or guardian ever had, now has, or may have, or which the child or parent or guardian's heirs, executors, administrators or assigns may have or claim to have, against San Juan Soccer, its officers, representatives, coaches and referees, their successors or assigns, for all personal injuries, known or unknown to my child/ward, and injuries to property, real or personal, caused by, or arising out of, the above described sport activities.

I, the parent or guardian, have read this and agree to be bound by this. _____
Signature of Parent/Guardian

In case of emergency, I authorize the adult in charge to seek any emergency medical care and procedures deemed necessary by a physician due to injuries sustained while playing soccer.

Signature of Parent/Guardian _____

VOLUNTEERING

We need people to help out to keep things going. Every week the fields need lined, let us know if you want to coach or help coach. Do you have referee experience? Advertise for registration in May, help with picture day in September. Take part, it's easy and it's fun.

Which would you be willing to help with:

Lining fields Advertising (May) Help traveling teams; organizing ferry tickets etc
 Coaching Picture Day(s) (September) Refereeing
 Team Parent (help with organization/paperwork) Other (i.e. committees for other events)

PARENTS CODE OF CONDUCT

1. Parents will support the efforts of **all** the volunteers of San Juan Soccer.
2. The use of profanity, drugs, alcohol or tobacco products during any SJ Soccer event is prohibited.
3. Set an example for your child and the others by always showing good sportsmanship.
4. Remember to praise your child's efforts and offer support.
5. Parents will not coach from the sideline. Offer only encouraging words.

Signature of Parents/Guardians _____

ATHLETE'S CODE OF CONDUCT

1. I will show respect towards all referees, coaches and players at all times.
2. I will demonstrate excellent sportsmanship both on and off the playing field.
3. I will come to games and practices prepared and ready to listen and learn and have fun.
4. I will put the team first and always be a team player.
5. The use of profanity, drugs, alcohol or tobacco products during any SJ Soccer event is prohibited.

Signature of Parents/Guardians _____

Signature of Child Participant _____

