LEICESTER SOCCER CLUB

www.leicestersoccer.com

(A nonprofit organization)

FALL 2014 SIGN-UPS U6 – U8

Tuesday- June 17, 2014
5:30pm to 7pm
Town Hall

Tuesday- June 24, 2014
5:30 pm to 7pm
Town Hall

Fill out ONE FORM PER CHILD. A check made out to **Leicester Soccer Club** along with this completed form may be brought to either sign-up night OR mailed to **PO Box 445 Rochdale, MA 01542 All new players must have a copy of their birth certificate.** Mailed in birth certificates will be returned by the coach at practice. Registration forms are only accepted at sign-up nights or mailed to the PO Box.

FEE: **$55.00** per child for the first two children and **$10.00** for each additional child per family.
LATE FEE: **$10.00** per child for all sign-ups received after July 15, 2014

Due to league deadlines, we cannot guarantee placement of any child registered after deadline.

PLEASE PRINT

LAST NAME: **FIRST NAME:**

ADDRESS: **CITY:** **STATE:**

ZIP CODE: **PHONE:** **EMAIL:**

PLAYER DATE OF BIRTH: **PLAYER GENDER M / F**
AGE GROUP: U6 [ ] DOB 9/1/08-8/31/10 U8 [ ] DOB 9/1/06-8/31/09

PARENT/ GUARDIAN **PHONE:**
OTHER PARENT/ GUARDIAN **PHONE:**

EMERGENCY CONTACT **PHONE:**

DOCTOR TO NOTIFY **PHONE:**
MEDICAL ISSUES?

CONSENT FOR MEDICAL TREATMENT (MINOR) AND USYSA DISCLAIMER

As parent or legal guardian of the above named player, I hereby give my 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 life, limb, or well-being of my dependent. I, the parent/ guardian of the minor agree that I and the minor will abide by the rules of the USYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associates with soccer snd in consideration for the USYSA accepting the registrant for its soccer programs and activities, I hereby release, discharge and/ or otherwise indemnify the USYSA, its affiliated organizations and sponsor, their employees and 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.

[ ] If you do not check this box the Leicester Soccer Club has your permission to use photos of your child on the Leicester Soccer Club website and possible literature handed out to Club participants.

SIGNATURE **AMT. PAID** **CHECK#**

ARE YOU ABLE TO COACH?

Special Team considerations: