

ANSONIA SOCCER CLUB REGISTRATION

PLAYER INFORMATION

Last Name (Player)		First Name (Player)		Home Telephone		Mobile Telephone	
				() -		() -	
Home Address				e-mail (for announcements and schedule changes) REQUIRED			
City		State	ZIP	Jersey Size:	YXS YS YM YL AS AM AL AXL		
				Short Size:	YXS YS YM YL AS AM AL AXL		
<input type="checkbox"/> Male <input type="checkbox"/> Female		Date of Birth		/ /			
List medical conditions/limitations:							
Last ASC team played for:		<input type="checkbox"/> Fall <input type="checkbox"/> Spring		20		Years of soccer playing experience:	

PARENT/GUARDIAN INFORMATION

Last Name (Father)		First Name (Father)		Last Name (Mother)		First Name (Mother)	
Home Address (If different from above player information)				Home Address (If different from above player information)			
City		State	ZIP	City	State	ZIP	
Home Telephone:		() -		Home Telephone:		() -	
Mobile Telephone:		() -		Mobile Telephone:		() -	
Email:				Email:			
I would be interested in volunteering:		Shirt Size:		Birth Date:		I would be interested in volunteering:	
		<input type="checkbox"/> Coach		<input type="checkbox"/> Assistant Coach			
		<input type="checkbox"/> Team Manager		<input type="checkbox"/> Team Parent			
		<input type="checkbox"/> Other:					

<p>MEDIA RELEASE</p> <p>Throughout the season, a child's name, photograph, or video may be released for use on ASC website or social media.</p> <p><input type="checkbox"/> I agree to the release of my child's name, photograph or video.</p> <p><input type="checkbox"/> I do not agree to the release of my child's name, photograph or video.</p> <p>RELEASE</p> <p>I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the ASC, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the ASC accepting the registrant for its soccer programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify the ASC, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities used for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participations in the Programs and/or being transported to or from the same, which transportation I hereby authorize.</p>	<p>CONSENT FOR MEDICAL TREATMENT</p> <p>As the 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 the life, limb or well-being of my dependent.</p> <p>ASC CODE OF CONDUCT</p> <p>As the parent/guardian of the above named player, I agree to abide by the following Code of Conduct:</p> <ul style="list-style-type: none"> ▪ I will do my part to stay in contact with the coach to keep apprised of changes to the practice & game schedules. ▪ I will encourage good sportsmanship by demonstrating positive support for all players, coaches, game officials, administrators, & spectators at all times. ▪ I will place the emotional and physical well being of all players ahead of any personal desire to win & I will remember that the game is for the benefit & enjoyment of the players. ▪ I will always allow the coach to be the only coach. ▪ I will not criticize or engage in confrontations with players, parents, coaches or game officials. ▪ I will not enter the field for any reason during the game. ▪ I understand that alcoholic beverages, illegal drugs and unauthorized prescription drugs shall not be possessed, consumed or distributed at any time at any soccer location. ▪ I understand that smoking is not allowed at any ASC event. ▪ I understand that when I agree to volunteer, I make a commitment to the ASC and I will fulfill my obligations accordingly. 	<p>ASC POLICIES</p> <ul style="list-style-type: none"> ▪ It is the player's responsibility to contact their coach if he/she is unable to attend any practice or game session. ▪ Players are responsible to come to practices and games fully equipped and properly attired. ▪ A 5-goal limit applies to all players in Recreation play. ▪ The ASC Board will decide if and when games will be cancelled or rescheduled. ▪ All players and their parents/guardians will respect and support our Code of Conduct. ▪ Players must meet all requirements set forth by the Ansonia Soccer Club in order to maintain their eligibility to play. <p style="text-align: center;">Registration dues are non-refundable after Feb 8th.</p> <p style="text-align: center;">I accept the terms of this document and verify that the information I have provided is truthful and accurate</p> <p>Name: _____</p> <p>Signature: _____</p> <p>Date: _____</p>
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ASC OFFICIAL USE ONLY

<p>Amount Due \$ _____ <input type="checkbox"/> Cash</p> <p>Amount Paid \$ _____ <input type="checkbox"/> Check</p> <p><input type="checkbox"/> Pre-Paid for the season</p> <p>Check Number _____</p> <p>Receipt Number _____</p> <p>Payment Received by _____</p> <p>Date _____</p>	<p>Player Photo <input type="checkbox"/> Received <input type="checkbox"/> On File <input type="checkbox"/> Not Required</p> <p>Birth Certificate <input type="checkbox"/> Received <input type="checkbox"/> On File <input type="checkbox"/> Not Required</p> <p>Proof of Residency <input type="checkbox"/> Verified: _____</p> <p>New Uniform? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Assigned Team _____</p> <p>Verified by _____</p> <p>Date _____</p>
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REGISTRATION NOTICE

Everyone Plays!

**** Spring 2017 PLAYING SEASON ****
April 9th – June 17th



Returning players can register online at www.ansoniasoccer.org
****Register by January 26th to avoid \$15 late fee. No registrations will be taken after Feb 8th.**
****Registration dues are non-refundable after Feb 8th.**



*Space can be limited!
Register on time to avoid
late fees!*

Date(s):	Tuesday January 24th, Wednesday January 25th, and Thursday January 26th
Time:	6:00 PM – 8:00 PM
Location:	Ansonia Armory – corner of State St & North Cliff St

Dues:	\$70 Recreational Players (In-Town) (Birth years 2007 – 2012) \$90 Travel Players (New Haven County) (Birth years 2006 and earlier)
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Requirements:	<ul style="list-style-type: none">✓ Proof of Ansonia residency (utility bill or other official U.S. Mail)✓ Birth Certificate (Photocopy we can keep, if possible)✓ Dues payment: check payable to "Ansonia Soccer Club"✓ Registration form signed by parent or legal guardian
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Ansonia Soccer Board
email: kevin@ansoniasoccer.org
ASC website: www.ansoniasoccer.org



<https://www.facebook.com/AnsoniaSoccerClub>