

MYS REGISTRATION FORM – SPRING 2009

Check out our website www.miltonyouthsoccer.org for more MYS info.

Mailing Address: MYS Post Office Box 586 Milton Vermont 05468

**** BIRTH CERTIFICATES ARE REQUIRED FOR NEW PLAYERS ****

PLAYER'S NAME: _____ <div style="display: flex; justify-content: space-around; width: 100%;"> (Last) (First) </div>	GENDER: _____ <div style="text-align: center;">(M/F)</div>	D.O.B: _____ <div style="text-align: center;">(mm/day/yr)</div>
ADDRESS: _____ _____ _____	Eligibility: U8: 8/1/2000 – 7/31/2002 U10: 8/1/1998 – 7/31/2000 U12: 8/1/1996 – 7/31/1998 **U14: 8/1/1994 – 7/31/1996 **U16: 8/1/1992 – 7/31/1994 **U17: 8/1/1991 – 7/31/1992	
PHONE: (HOME) _____ (WORK) _____ (CELL) _____ (E-MAIL) _____	In an effort to conform to the school calendar, players who have an <u>August</u> birthday, and just miss the cut-off date for the next age bracket, may opt to register for either team. For example, a U10 player with a birthdate of 8/31/98 may register for <u>either</u> the U10 or the U12 team.	
Please indicate any physical limitations (allergies, hearing, sight, etc): _____ _____		

** PLEASE NOTE: U14 boys, U16 and U17 fees have been set based on Division 1 status. In the event that we are able to field two teams (Div 1 and Div 2), the players of the Division 2 team will receive a \$10 refund for the fee difference. In the event that there are not enough registered players to field a team, the full registration fee will be refunded.

REGISTRATION FEE (circle one): U8 Coed: \$40.00 U10: \$70.00 U12: \$70.00 U14 <u>Girls</u> (Div 2): \$75.00 U14 <u>Boys</u>/U16/U17 (Div 1): \$85.00 LATE FEE: \$15.00 if received after 9/30/08. If unable to register in person please complete the application form, make check payable to MYS and mail to: MYS Post Office Box 586 Milton Vermont 05468 <div style="text-align: center;">"Scholarships available upon request"</div>
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CONSENT FOR MEDICAL TREATMENT

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 the above named player.

Signature of Parent or Guardian _____

RELEASE AND ASSUMPTION OF RISK OF PARTICIPATION

I/We, the parents/guardian of the registrant, a minor, agree that I/we and the registrant will abide by the rules of the USYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for USYSA accepting the registrant for its soccer programs and activities (the Program), I hereby release, discharge and/or otherwise indemnify the USYSA, its affiliated organizations and sponsors, their employees and associated personnel, including owners of the 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 and from the same, which transportation I hereby authorize. I understand that good sportsmanship is expected of parents and players alike. I will abide by the league rule of no smoking at the fields.

Parent/Guardian's Printed Name: _____

Parent/Guardian's Signature: _____

MYS OFFICE USE ONLY:

Fee Paid: **Cash:** _____ **Check:** _____ **Check #:** _____ **Age Group Assign:** _____

Date Application Received: _____ **Application Taken By:** _____

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MYS Parents Code of Conduct

The **MYS** board members and other MYS volunteers are committed to the Milton community for delivering a quality youth soccer program. We all know children's sports are supposed to be fun for the children involved. Unfortunately, there are some parents, fans and others that don't realize that their behaviors can have a lasting emotional effect on children. Young athletes can be disillusioned in youth sports programs because adults have unfairly taken the fun out of the game. That is why the MYS board has adopted the following **Code of Conduct** for parents and spectators to abide by during every MYS event. We ask that you read and sign below to acknowledge your support of our policy. The Code of Conduct can also be found at www.miltonyouthsoccer.org.

I agree that:

1. I will enjoy my child's opportunity to experience the benefits in participating in the sport.
2. I will remember that children participate to have fun and that the game is for youth, and not adults.
3. I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
4. I will encourage my child and the other children on their team.
5. I will make every effort to attend and be on time for all team events. If I am not in attendance of the event I will make every effort to promptly pick up my child or make arrangements for their safe return to home.
6. I (and my guests) will refrain from coaching my child or other players from the sidelines during games or practices, unless I am one of the official coaches of the team.
7. I (and my guests) will not engage in any kind of un-sportsman like conduct toward any official, coach, player or parent. These include, but are not limited to: booing, taunting, use of profane language or gestures, or physical contact.
8. I will encourage my child to learn and play by the rules of the game and to resolve conflicts without resorting to hostility, violence or other behaviors that could endanger the health or well being of other players.
9. I will see that my child treats other players, coaches, officials and spectators with respect regardless of their race, color, creed, sex or ability.
10. I will provide my child with a sports environment that is free from drugs, tobacco and alcohol and refrain from their use at every MYS event.
11. I will respect the coaches and officials and their authority during games and will never question, discuss or confront coaches or officials at the game field, and will take the time to speak with coaches or officials at an agreed upon time and place.

Refund Policy:

Players who withdraw prior to January 10, 2009 will receive a full refund. Players who withdraw between January 11 and February 25, 2009, will receive a 50% refund. After February 25, 2009, fees are nonrefundable. Players who are placed on wait-lists will receive full refunds after December 1, 2008 if they are not placed on a team.

Players wishing to withdraw must notify the registrar directly (Heather Kelley, hrkelley@comcast.net, 893-7372), in addition to their coach (if assigned to a team). Exceptions will be made for special circumstances upon review by the Board.

Parent's Signature: _____ Date: _____