

Pacific Soccer Association

P.O. Box 111, Pacific, Mo 63069
www.pacificsoccerassociation.com

PSA use only
Boy or Girl _____
Age _____
Grade _____
FC Division _____
or
WC coach name _____

Registration is at Liberty Field from 11:00am – 1:00pm
 On 4/17, 5/8, 6/12. You must register in person or by
 mail. In order for your registration to be processed, you
 must have the following:

- *Birth Certificate (may already be on file)
- *volunteer form signed and **scheduled** with deposit check
- * \$20 late fee if registering after 6/20.

Player's Name: _____
 Father's Name: _____ Mother's Name: _____
 Address: _____ City: _____ State: MO Zip: _____
 Phone () _____ Work () _____ Cell () _____

List two other people to contact in case parent/guardian cannot be reached.
 Name: _____ Relationship: _____ Home Ph: _____ Cell Phone: _____
 Name: _____ Relationship: _____ Home Ph: _____ Cell Phone: _____

In my absence, I authorize emergency services to be called for my child _____. I further understand that should a health problem arise, I will be notified. If I can't be reached by telephone, transportation and medical treatment, including surgery as deemed necessary by competent/medical personnel, would be rendered.

Fees must be paid in full and on time to be registered for this year's soccer program!!!
 FEES: PeeWees \$55 (born on or after 8/1/06) Singles \$65 Family (two or more) \$100
A \$75 Concession/Field Duty Deposit is due upon registration. 5 HOUR DUTY MUST BE SCHEDULED AT REGISTRATION. I understand if I cannot work on the scheduled date, it is my responsibility to find another adult to cover the shift. Failure to do so will result in my deposit check being cashed. I understand that I may buy out of my work duty for \$50.

Duty Work Date _____ Concession or Field _____ Deposit Check # _____
 Buyout Check # _____
 PAID: Check # _____ Cash amt _____ Money Order # _____ Received By _____ Date _____

Make Checks/Money Order payable to Pacific Soccer Association or PSA. You may send completed form w/ payment and deposit checks to: Pacific Soccer Association, P. O. Box 111, Pacific, MO 63069. Please send separate checks for registration fee and deposit. Do not send cash.

This Is A Volunteer Organization – Any Help Is Appreciated. Please circle one if you are able to help

I will: A. Coach a Team B. Help Coach a Team

Parent/Guardian Signature: _____ Date: _____

PACIFIC/FRANKLIN/WEST COUNTY SOCCER ACCEPTANCE

All participants (adult and youth) must observe the following guidelines for conduct.

1. Participate fully in all sessions.
2. Show respect for property and facilities used during the activity and assume financial responsibility for any damage they cause.
3. Observe the established schedule.
4. Appropriate and courteous behavior is expected. Swearing and obscene gestures are NOT permitted. All other participants, guests, chaperones and visitors should be treated with respect and common courtesy. Participants are expected to dress appropriately. No alcohol, stimulants, nonprescription drugs or tobacco products will be allowed.
5. Will follow any rules stated in affiliated association by-laws.

I understand and accept the responsibility for following the above guidelines. I understand that failure to follow these guidelines will result in dismissal from the event or activity. Further, we accept financial responsibility for damages to property or materials, travel costs and/or program costs which might result from violation of this agreement. I understand and agree that in consideration of the acceptance of my child in these activities, I release the Pacific Soccer Association/Franklin County Soccer/West County Soccer League, their respective officers, agents, and/or employees from all liability and loss (including court cost and attorney fees), resulting from any property damage, personal injury and bodily injury, including death, to me or my child, which is caused or claimed to be caused in whole or part by the negligent acts or omissions of the Pacific Soccer Association/Franklin County Soccer/West County Soccer League, their respective officers, agents and/or employees. I will be bound by all rules and regulations while participating in said events.*

Parent/Guardian Signature: _____ Date: _____