



PLAYER REGISTRATION FORM BOERNE SOCCER CLUB

P.O. Box 2117
Boerne, TX 78006
(830) 755-2356

www.boernesoccer.org



FEES Due: Registration \$ _____	Scholarship <input type="checkbox"/>	Family Share _____	Date _____
\$25 Optional Non Vol _____	Vol Voucher <input type="checkbox"/>	Volunteer _____	Check/MO # _____
Field Fee \$10 _____	Multi Family <input type="checkbox"/>		Total Paid _____
(Uniform, Equip,) Other _____			Balance Due: _____
(Donation, Etc.) Other _____	Total Charges _____		

FEES:	On Time Registration Fees	\$25 Late Fee due after 8/15/2010 for Select or 8/29/2010 for Rec/Academy
Required: 10 Hrs of Volunteer Service (can pay \$25 per season in lieu of Hrs)	Rec Registration Fee U5-U10 \$110	Late Registration \$135
	Rec Registration Fee U11+ \$135	Late Registration \$160
	Academy Program Fee* \$335	Late Registration \$360
	Select Fees (Team & Training Incl) \$990	Late Registration \$1,015
		Multi Player Discount Avail (\$25 per player)
		Select Uniform Fee \$240

(Must match Birth Certificate) **Check One :** Rec Academy Select

Name: _____ (U9/U10 Only)
Last First Middle Initial

Mailing Address: _____
Street City Zip

Home Phone: _____ **Cell Phone:** _____
area code area code

E-Mail: _____ **Child's current school:** _____

Date of Birth: _____ **Current Age:** _____ **Male** **Female** **Seasons Played:** _____

One Buddy Request for Under 5/6 Players _____ (BSC makes no guarantee that requests will be honored but will attempt to do so within reason and within guidelines)

List Any Medical Conditions: _____

Fathers Name _____ Occupation _____ Wk Phone _____

Mothers Name _____ Occupation _____ Wk Phone _____

Person to notify in emergency _____ Relationship _____ Telephone _____

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of USYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration by the USYSA, accepting the registrant for its soccer programs and activities (the "Programs"). I hereby release, discharge and/or otherwise indemnify the USYSA, its affiliated organizations and sponsors, 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.

Print Parent/Guardian Name: _____

Signature: **X** _____

I CAN BEST ASSIST BY:

<input type="checkbox"/> Coach	<input type="checkbox"/> Age Commissioner
<input type="checkbox"/> Asst Coach	<input type="checkbox"/> Registration Help
<input type="checkbox"/> Field Preparation	<input type="checkbox"/> Publicity
<input type="checkbox"/> Field Development	<input type="checkbox"/> Team Sponsor
<input type="checkbox"/> Board Member	<input type="checkbox"/> Tournament Help
<input type="checkbox"/> Fundraising	<input type="checkbox"/> \$25 non-vol fee
<input type="checkbox"/> Telephone Help	<input type="checkbox"/> if not volunteering

DONATION _____

CONSENT FOR MEDICAL TREATMENT MINOR

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 my dependent.

Signature of Parent or Guardian _____

X _____

CITY OF BOERNE WAIVER FORM

I am aware that Boerne Soccer Club (BSC) leases fields from the City of Boerne for use in soccer activities and that the sole responsibility of BSC during their scheduled use time. It is also my understanding that the City of Boerne does not supervise BSC activities during those activities. There fore; I hereby agree to Indemnify and HOLD HARMLESS the City of Boerne and its employees, officers, directors, and representatives from any liability which may incur to me as a participant or to my child; however arising as a result of participation on/with the Boerne Soccer Club programs when utilizing the City of Boerne fields.

Signature of Parent/Guardian: **X** _____