



Ames Soccer Club Spring 2010

U11-U14 Teams Form

Affix check and mail to Ames Soccer Club, PO Box 423, Ames, IA 50010 By Feb 1, 2010

In order to plan for the upcoming spring season we are asking all U11 – U14 players to commit to their spring teams by February 1. We need to know the make-up of rosters in order to place the teams in appropriate divisions of the IPSL and make arrangements for tournaments. Some teams will also assess "team fees" to pay for tournament entries (etc.) if sufficient team funds do not remain in your team's account. **Please return this form by Feb 1.**

Mark the appropriate choice:

- _____ I will play in the Spring. A \$50 deposit on my registration fees is attached. The remainder of the registration fee will be due by March 20.
- _____ I will play in the Spring. My full registration fees (\$284 for U11-U12 teams, \$304 for U13-U14 teams) is attached.
- _____ I will play in the Spring, but I need to make alternate payment arrangements. I will contact Ralph Ackerman at 292-5203 or racker@iastate.edu or I will download the financial aid form from <http://www.amessoccer.org/SignUp/competitive.html>.
- _____ I am not playing in Spring.

Please make any necessary corrections to the following information:

Player Name: _____
Relevant health issues ("none" if blank): _____

Primary Parent/Guardian Info (address and emails): _____

Home: _____ ; Work: _____ ; Cell: _____
(Cell phones are critical in case of cancellations or injury!)

Club Volunteerism

The club is a 501c3 organization and operates on a non-profit basis using *lots* of volunteer labor. The most visible of these are **parent-coaches, members of the board or club committees, and volunteers at tournaments.** We will major fund-raising tournaments in Winter and Spring to keep fees reasonable. Please reserve these dates on your calendar and help out.

I or my family will volunteer for the club:

_____ Member of Board _____ Member of Club Committee _____ Indoor tournaments (Feb and March)
_____ Kohl's Cup June 5-6 (tentative) _____ Other: _____

Release. As the parent or legal guardian of the player(s) I am registering, I hereby give the above named player(s) permission to participate in the activities of the Ames Soccer Club. I also give permission, in case of injury, to have an Athletic Trainer, Medical Doctor, Nurse, Hospital or Clinic provide emergency medical assistance and/or treatment if in their opinion it is necessary. I RELEASE AND FOREVER DISCHARGE the Ames Soccer Club, its officers, employees, agents, and volunteers from any and all claims, demands and actions of any and every nature whatsoever that I may have for any and all loss, damage or injury sustained by me and/or my minor child for whom I am signing, before, during and after team sponsored activities, games and/or practices.

_____ Parent/guardian signature and date