



Oberlin Youth Soccer Association Player Registration

Fall 2010/Spring 2011 season

<http://www.oberlinsoccer.org>

e-mail: oyza-soccer@live.com

This box for Oberlin registrar use only:
League: Lorain County Soccer League Club: Oberlin Youth Soccer Association
Age group: U Team: OB paid: date received:

Player name: _____
Address _____
City, State, Zip _____
Birth date _____ Male / Female (circle one)
Telephone _____
Previous season's OYSA coach, if any _____
OYSA rosters girls on girls' teams where there are sufficient numbers.
Medical problems/prohibitions _____

Parent/Guardian Name _____
Primary Phone Number _____ *(Will be used for automated phone messaging system)*
E-mail for soccer-related messages _____
Mobile Phone _____
Person to notify in emergency _____ phone _____
Doctor to notify in emergency _____ phone _____

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

Parent/guardian sign _____ date _____

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.

Consent given by _____ date _____

Parental support: The Oberlin Youth Soccer Association is a 100% volunteer organization. Coaches, assistant coaches, board members, and organizers all volunteer their time. The player fee goes to insurance, uniform, and payment of game referees. We ask for active participation of all parents in our program. **Please check areas in which you would be willing to help:**

- | | |
|--|---|
| <input type="checkbox"/> Coach | <input type="checkbox"/> Sponsorship |
| <input type="checkbox"/> Assistant Coach | <input type="checkbox"/> Field preparation |
| <input type="checkbox"/> Team snack organization | <input type="checkbox"/> Publicity/Fund raising |
| <input type="checkbox"/> Team reporter | <input type="checkbox"/> Donor ** |
| <input type="checkbox"/> Board member | <input type="checkbox"/> Other: _____ |

** All Donations are greatly welcomed and will be used towards the growth of our youth soccer association.

THIS IS A TWO-SIDED DOCUMENT. PLEASE REVIEW 2nd PAGE FOR RULES AND REQUIREMENTS.

•**Fees:** The fee for Instructional players (4 and 5 year olds) is \$40. The fee for all other players is \$60 for one player, \$100 for two players, and \$125 for three or more players in the same family. (No refunds. You are paying for both fall and spring seasons. Make check payable to "OYSA".) Fees are waived for OYSA board members, and halved for coaches and assistant coaches. If paying full fees would be rough, please request financial aid from the Board (oysa-soccer@live.com), or submit a WRITTEN request with your registration form.

•**Age documentation required (U9 and older):** All players in age group U9, and players in older age groups new to OYSA, must submit **ONE photocopy of their birth certificate or passport.** (This Ohio League requirement verifies the player's age.) Returning players do **NOT** need to resubmit this every year.

•**Photo (U9 and older):** Each **NEW** player **U9 and up** must submit a **small photograph** of his or her face, with his or her name printed clearly on the back. (This photo will become a part of his or her player pass)

PLEASE NOTE: New for 2010! Returning players **DO NOT** need to submit a photo. Current passes will be valid and updated with dated stickers in the future.

•**Registration procedure:** This form registers a player for *both* the Fall 2010 and Spring 2011 seasons. Complete a separate registration form for each child. Submit completed registration packets (this registration form, check, age documentation, and photo) as follows:

Returning players: As a current soccer player, you have first priority for placement on next year's team. To take advantage of that priority, you must return your completed registration packet to your **coach** by **June 5th, 2010**.

New players: Registration packets are due by **Monday, August 13th, 2010**. Please mail completed registration packets to:

Mary McGill, Registrar
67 King St
Oberlin, OH 44074.

Late registrations will be accepted as long as there is space available on the roster until the LCSL deadline (usually the week of the first game) but late registrants may miss one or more games and will pay a \$10 surcharge.

•**Important Double-Card Rule:**
Player Removal

If your son or daughter elects to play on an additional team other than their primary team due to open roster slots, he or she is the first to be removed in the event a new player should register by the LCSL deadline.

•**Donations:**

OYSA is a non-profit organization and operates on an annual basis by monies raised through registration fees, fundraisers, and grants. If you are interested in donating to OYSA and help our association grow, please make checks payable to "**OYSA**" and mail to Mail to:

Vance DeBouter, OYSA Treasurer
181 W. College St
Oberlin, OH 44074

PLEASE NOTE:

Incomplete registrations (for example w/o payment or financial aid request, or parental signature, or photo or age verification where applicable) does not hold a player's spot on a team.