

ROOTSTOWN SOCCER CLUB FALL 2010 REGISTRATION

PO Box 72 Rootstown, OH 44272 WEBSITE: www.RootstownSoccerClub.org

Player's LAST Name _____ Player's FIRST Name _____ DOB (MM/DD/YYYY) _____
MAILING address _____ City _____ ZIP _____ AGE on 7/31/10 _____ YEARS of Experience _____
E-MAIL address _____ HOME Phone Number _____ CELL Number _____
FATHER'S name _____ Mother's name _____ Mother's DOB (MM/DD/YYYY) ***REQUIRED***

Payment: _____
Division: _____
Coach: _____
Shirt: _____
Short: _____

WAIVER OF LIABILITY

I, the parent/guardian of the registrant, a minor, agree that the registrant and I 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 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.

SIGNATURE Name of Parent/Legal Guardian (PRINT) Date

MEDICAL RELEASE FORM

As the parent/legal guardian of _____, I request that in my absence, the above-named player be admitted to any hospital or medical facility for diagnosis and treatment. I request and authorize physicians, dentists, and staff, duly licensed as Doctors of Medicine or Doctors of Dentistry or other such licensed technicians or nurses, to perform any diagnostic procedures, treatment procedures, operative procedures and x-ray treatment of the above minor. I have not been given a guarantee as to the results of examination or treatment. I authorize the hospital or medical facility to dispose of any specimen or tissue taken from the above named player.

Alternate person to notify in case of emergency: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____

Medical History & Conditions: _____
(PLEASE LIST ANY PERTINENT DETAILS ABOUT THE PLAYER'S ALLERGIES, MEDICATIONS, AILMENTS, ETC.)

SIGNATURE Name of Parent/Legal Guardian (PRINT) Date

PLAYER RELEASE WAIVER (REQUIRED)

I understand that my child, by registering for the fall is committing to play with his/her assigned team for the entire soccer year (August-July) and that the club will respect that commitment. However, if we fail to affirm this commitment, through whatever process used by the club for all of its players, by the posted team registration date for spring play, in the league in which the team plays, we accept the decision of the club to release our child from this commitment.

Player's Name _____ Rootstown Soccer Club Team Name _____

SIGNATURE of Parent/Legal Guardian Date

PHOTO RELEASE WAIVER

I, the undersigned, give [] or do not give [] the Rootstown Soccer Club permission to use my child's photographs (without name) on their website/publications.

SIGNATURE of Parent/Legal Guardian Date

For additional information, please visit the club's website (www.RootstownSoccerClub.org)

****All first year players MUST bring a copy of his/her birth certificate for age verification****
**** GAASA players need to provide a wallet sized photo for their license****

Registration Fees: \$55.00 per child in U6, U8, and U10 recreational divisions ****Family Discount**** First two children at regular price
\$65.00 per child in the U13 recreational division Each additional child gets a \$10 discount
\$75.00 per child for all GAASA divisions

GAASA traveling teams will only be available if there are enough players to fill a roster. If your child gets cut from a GAASA team, he or she will be placed on the appropriate recreational team. You will be notified if a tryout is necessary for the traveling teams.

**Greater Akron Amateur Soccer Association
Code of Conduct**

Acceptance of this Code of Conduct is a condition of membership and participation in the Greater Akron Amateur Soccer Association ("GAASA"). Clubs that are members of GAASA ("Club") are required to sign this Code of Conduct on behalf of the Club, as well as require that all Club coaches, players, and the players' parents or legal guardians sign this Code of Conduct.

Participation in GAASA-sponsored activities play an important role in promoting the physical, social and emotional development of children. It is therefore essential for parents, coaches and officials to encourage youth athletes to embrace the values of good sportsmanship. Moreover, adults involved in GAASA-sponsored activities should be models of good sportsmanship and should lead by example by demonstrating fairness, respect and self-control.

Participation in GAASA-sponsored activities is also a privilege granted by GAASA, and its state and national affiliations. For purposes of this Code of Conduct, "GAASA-sponsored activities" shall include activities sponsored by or affiliated with GAASA, the Ohio Youth Soccer Association-North, U.S. Youth Soccer Association and/or the U.S. Soccer Federation. Failure to adhere to this Code of Conduct and/or generally accepted standards of community citizenship can result in disciplinary action, including but not limited to the revocation of the participant's membership in GAASA and/or the Club.

I therefore pledge to be responsible for my words and actions while attending, coaching, officiating or participating in a GAASA-sponsored activity and shall conform my behavior to the following Code of Conduct:

1. I will not engage in, nor encourage any other person to engage in, unsportsmanlike conduct with any coach, parent, player, participant, official or any other attendee of a GAASA-sponsored event.
2. I will not engage in, nor encourage any other person to engage in, any behavior which would endanger the health, safety or well-being of any coach, parent, player, participant, official or any other attendee of a GAASA-sponsored activity.
3. I will not, nor will I permit or encourage any other person, to use drugs or alcohol while at a GAASA-sponsored activity and will not attend, coach, officiate or participate in a GAASA-sponsored activity while under the influence of drugs or alcohol.
4. I will not engage in, nor encourage any other person to engage in, the use of profanity at a GAASA-sponsored activity.
5. I will treat, and will encourage my child to treat, every coach, parent, player, participant, official or any other attendee of a GAASA-sponsored activity with respect regardless of race, creed, color, national origin, sex, sexual orientation or ability.
6. I will not engage in, nor encourage any other person to engage in, verbal or physical threats or abuse aimed at any coach, parent, player, participant, official or any other attendee of a GAASA-sponsored activity.
7. I will not initiate, nor encourage any other person to initiate, a fight or scuffle with any coach, parent, player, participant, official or any other attendee of a GAASA-sponsored activity.

I hereby agree that if I fail to conform my conduct to the foregoing Code of Conduct while attending, coaching, officiating or participating in a GAASA-sponsored activity, I will be subject to disciplinary action, including but not limited to revocation of membership in GAASA and/or the Club. Further, I understand that similar disciplinary action may be taken by GAASA and/or the Club if my conduct in activities not sponsored by GAASA are considered to bring discredit to GAASA and/or the Club.

In addition to the above, any member of GAASA who is convicted for any crimes as defined in the Ohio Revised Code-Section 109.572(a)(1) will be subject to immediate revocation of all GAASA membership privileges.

GAASA CODE OF CONDUCT

We, the undersigned, have read, understand and agree to abide by the GAASA Code of Conduct. We also agree to accept actions taken by GAASA and/or the Rootstown Soccer Club for failure to conform to the Code of Conduct.

SIGNATURE of Parent/Legal Guardian

Name of Parent/Legal Guardian (PRINT)

SIGNATURE of Player

Name of Player (PRINT)