

ANDOVER SOCCER ASSOCIATION - SPRING 2010 REGISTRATION FORM

WWW.ANDOVERSOCCER.ORG

- **Forms are due on 12/4/09.** Forms postmarked after 12/4/09 must include a \$30 late fee per form.
- First Graders (U7's) and all players who are new to ASA must include a copy of player's birth certificate.
- Include **check payable** to "Andover Soccer Association" – forms without payment will not be processed.
- Mail to: **ASA-Spring 2010 Registration, P.O. Box 1014, Andover, MA 01810.**

PLAYER INFORMATION (PLEASE USE ONE FORM FOR EACH PLAYER)

LAST NAME _____ FIRST NAME _____

ADDRESS _____

TELEPHONE _____ E-MAIL* _____

(* Mandatory – will not be shared with outside groups)

CURRENT GRADE _____ SCHOOL _____ DATE OF BIRTH ____/____/____ SEX _____ (M or F)

MOTHER'S NAME _____ FATHER'S NAME _____

IN-TOWN: Program begins at Grade 1. Please check the appropriate grade for Spring 2010.

Fee of \$85: Grade 1 ("U7") Grade 2 ("U8")

Fee of \$95: Grade 3 ("U9") Grade 4 ("U10") Grade 5 ("U12") Grade 6 ("U12")

In Town Uniforms: Would you like ASA to pre-order shirts for you? (ASA cannot take orders after 12/4/09.)

If yes, please add \$14 to your total for 2 cotton tshirts (gold and white) and indicate size YM YL AS AM

TRAVEL: Please check the appropriate age category. NOTE: All players who did not play in the Fall 2009 travel program must include a 1 ¼" x 1 ¼" photo and your uniform size regardless of whether you played travel before!

Uniform Sizes (AS, AM, AL, AXL): Shirt _____ Shorts _____

U11 Travel-\$150 - Born between 8/1/98 – 7/31/99 regardless of grade or born after 7/31/97 and currently in 5th grade.

U12 Travel-\$150 - Born between 8/1/97 – 7/31/98 regardless of grade or born after 7/31/98 and currently in 6th grade.

U13 Travel-\$150 - Born between 8/1/96 – 7/31/97 regardless of grade or born after 7/31/97 and currently in 7th grade.

U14 Travel-\$150 - Born between 8/1/95 – 7/31/96 regardless of grade or born after 7/31/96 and currently in 8th grade.

U16 Travel-\$150 - Born between 8/1/93 – 7/31/95 regardless of grade. If born after 7/31/95 and in 9th grade, please choose U16 or U14.

U18 Travel-\$150 - Born between 8/1/91 – 7/31/93 regardless of grade. If born after 7/31/93 and in 11th grade, please choose U18 or U16.

Optional: Please consider supporting the Andover Soccer Fields Development Fund with a contribution.

\$1 \$5 \$10 \$20 Other _____

VOLUNTEER POSITIONS: ASA is a volunteer organization. Please consider giving your time and support by signing up for any of the following Volunteer Positions.

Name of interested parent _____ D.O.B. ____/____/____

Coach Asst. Coach Age Group Coordinator Field Support (lining fields, nets, etc.)

NOTES: PROBLEM PRACTICE NIGHTS OR PHYSICAL LIMITATIONS ONLY. NO REQUESTS FOR SPECIFIC TEAMS/COACHES.

I, the parent/guardian of the registrant, a minor, agree that I and the registrant 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 the 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. As the Parent/guardian of the registrant, I hereby give my consent for emergency medical care by a duly licensed Doctor or Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve life, limb or well being of my dependent.

Parent/guardian signature: _____ **Date:** _____

Doctor to notify in emergency: _____ **Telephone:** _____