

Sorry no refunds. **\$45.00 Fee *must* accompany form!** All players are chosen random draw-*We absolutely do not draft players for specific teams. Form Due by **March 12th**. NO PRIOR SOCCER EXPERIENCE NEEDED! WE ARE A TRAINING LEAGUE. WWW.VINTONCOUNTYSOCCER.COM (740) 596-1124. Ages 4 (by January 1, 2010) through age 15.
Vinton County Soccer League Registration Form /Player Information:*

Name: _____ Address: _____
 First Name Middle Name Last Name (Street, City, Zip)

Mother's/Fathers/Guardian's Name: _____ Email: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____ Date of Birth _____

Any health problems we should be aware of? _____ Age: (as of January 1, 2010) _____

Uniform ordering: Please place a check next to the correct sizes below: height: _____ weight: _____
Shirt:

	Small	Medium	Large	Extra Large	XX Large
Adult Sizes					

	X -Small	Small	Medium	Large
Youth Sizes				

Short Size* Sizing Chart- *Shorts sizes are unisex and based on inches in waist size. Please circle the correct size.*

	x-small	Small	Medium	Large	Extra Large
Adult	-----Youth only	30"/32"	34"/36"	38"/40"	42"/44"
Youth	x-small	22"/24"	26"/28"	28"/30"	---

Sock Sizing Chart

Challenger Teamwear Size	Please Check one
Adult (shoe size: 11-13)	
Junior ((shoe size: 8.5- 11)	
Youth ((shoe size: 6-8.5)	

The Vinton County Soccer League was built and managed by Volunteers who work outside the organization -hardworking and caring parents and community members willing to become involved so soccer is more than just a dream here. We understand parents work or may have monetary concerns, but feel everyone can and must support the organization to maintain its presence. We request that all parents support the league by volunteering in some way to continue our efforts and keep fees low. Please choose at least one (1) of the following. If you do not choose one, we will choose it for you.

__ Coach __ Asst. Coach __ Sponsor \$25.00-? __ Assistant Referee __ _ Donate Trophies _ Team Mom/Dad _ Donate drinks for players _ Donate 100 drink cups (700 needed for season) _Help clean up before/after games _other

Consent to Play: I understand that the mission of the Vinton County Soccer Association for Youth is to provide all children the opportunity to play soccer in a safe, fun, and encouraging environment and to provide basic training of soccer skills so they are prepared to compete in higher education sports.

DISRESPECTFUL BEHAVIOR of any kind is inconsistent with that mission and will not be tolerated. Parties to such behavior will be asked to leave and, if necessary, escorted off the playing field. Furthermore, I understand that the Official's word is the LAW of this venue and that he or she shall be treated with SPECIAL RESPECT—which means there will be no bantering with nor ridicule of any official whether before, during or after the game. In addition, I will take responsibility in seeing that my child behaves in accordance with the Soccer Association for Youth's mission, principles and code of ethics. In short, I agree to be a positive ROLE MODEL for children. I also agree that my child's name and picture be printed in newspapers/advertising as a part of letting other children know about soccer in Vinton County and to positively reflect our Association to the public. I attest my child is in good health.

WE HEREBY AGREE THAT THE SOCCER ASSOCIATION FOR YOUTH (SAY) ITS MEMBERS, COACHES OR OFFICERS SHALL NOT BE LIABLE FOR ANY INJURY OR LOSS WHICH MY CHILD MAY SUSTAIN WHILE PARTICIPATING IN ACTIVITIES OF ANY KIND WHETHER SPONSORED BY OR UNDER THE SUPERVISION OF SAY AND WE AGREE TO INDEMNIFY AND TO HOLD HARMLESS SAY, ITS MEMBERS, COACHES, OFFICERS OR DESIGNATES OF ANY KIND FROM ANY CLAIM WHATSOEVER.

PARENT OR GUARDIAN SIGNATURE:

Date _____

Staff Only: Season _____ # of Players _____ Reg Ck# _____ Amt Paid _____ Date _____

PLEASE RETURN FORM AND FEE TO: **Vinton County Soccer League ATTN: Jannette 25891 Creola Hue Road, Creola Ohio 45622**