

# Registration Form



Deadline to register is January 9

www.mansfieldsoccer.org

| Registration Fees                 | League Use Only |
|-----------------------------------|-----------------|
| Under 5-6 - \$45                  |                 |
| Under 7-8 - \$45                  |                 |
| Under 9-10 - \$55                 |                 |
| Under 11-19 - \$55                |                 |
| <b>\$10 late fee after Jan. 9</b> |                 |

COMPLETE FORM AND RETURN WITH BIRTH CERTIFICATE AND FEE

|  |            |  |                          |
|--|------------|--|--------------------------|
| _____  |            | _____  | <input type="checkbox"/> |
| Last Name  |            | First Name   | Init.                    |
| _____  |            | _____  | _____                    |
| Street   |            | Apt #  | City                     |
| _____  | _____      | _____  | _____                    |
| Zip code   | Phone      | Male/Female <input type="checkbox"/>   | Birth Date               |
| _____  | _____      | _____  | _____                    |
| Last team for: circle which league<br>ASA - YMCA - MSA - Other Association |            | School - If not an MISD School you will need a release from your Home Assoc./ Private school students – submit proof of attendance |                          |
| _____  | _____      | _____  | Jersey # _____           |
| Fathers Name   | Work Phone | Cell Phone   |                          |
| _____  | _____      | _____  |                          |
| Mothers Name   | Work Phone | Cell Phone   |                          |
| _____  | _____      | _____  |                          |
| _____  |            |  |                          |
| E-Mail address   |            |  |                          |

### IMPORTANT

We hereby certify that the above information is true and correct. We realize this soccer program is a nonprofit and voluntary program, instituted for the benefit of the youth in the community and we therefore agree to hold no party connected with the team, sponsors, or the league responsible for the injury or harm to the participant during the normal pursuit of team activities. Participation in league activities, playing or practicing, shall not be allowed until this contract has been signed. We, the undersigned do hereby agree to abide by the constitution and playing rules of the Mansfield Soccer Association, North Texas Soccer and United States Youth Soccer.

**A copy of birth certificate or other proof of age is required.**

Name: \_\_\_\_\_  
Parent/Legal Guardian (please print)

Signature: X \_\_\_\_\_ Date: \_\_\_\_\_

### PARENTAL SUPPORT

We ask for active participation of all parents in our program. Check area(s) in which you would be willing to help.

- Coach
- Asst. Coach
- Team Mgr
- Special Projects
- Field Preparation
- Board Member
- Sponsorship
- Disciplinary Committee
- Other: \_\_\_\_\_

### REFUND POLICY

Refund requests must be made in writing prior to player placement to receive a full refund. Once the player placement has begun for the players age group, a \$10 administrative fee will be deducted from the refund. NO refund requests will be accepted after February 27. All refund checks will be written within 3 weeks of the season start date.

### TEAM/COACH REQUEST POLICY

Only players in the U5 and U6 age groups, who have not previously been rostered to an MSA team, can request a specific team or coach or to play with a buddy. No other players can request a team or coach.

**Return this application along with a copy of the players birth certificate and your check or money order payable to MSA to:**

Mansfield Soccer Association  
P.O. Box 533  
Mansfield, Texas 76063

For more information call – 817-473-1177