



PEAK TO PEAK SOCCER

Non-competitive Youth Soccer Registration Form

Registration Fee: \$65.00 (includes t-shirt, medal, practices, games) prior to 7/22/11

Late Fee: \$10.00 after 7/22/11

Family Discounts:

1st member: \$65.00

2nd member: \$60.00

3rd or more: \$55.00

amount of payment including late fee = _____
subtract \$10 if using last year's jersey

Make checks payable to:

TEENS, Inc.

PO Box 1070

Nederland, CO 80466

Participant's Name _____ Male _____ Female _____

Mailing Address: _____

City, State _____ Zip _____

Home phone: _____ E-mail _____

Age: ____ (as of 7/31/10) Birthdate _____ #Years Played ____ Last Season/Year Played ____

(#1) Parent/Guardian's name: _____

Work phone: _____ Cell phone: _____

(#2) Parent/Guardian's name: _____

Work phone: _____ Cell phone: _____

Emergency Contact: (#1) _____ (#2) _____

Phone numbers: (#1) _____ (#2) _____

List any medical problems or conditions that may impact the player's participation in soccer:
(including allergies)

Friend to (possibly) be grouped with: _____

Although one main goal of Peak Soccer is to promote sportsmanship, are there any major conflicts you would like us to take into consideration:

T-Shirt Size: Youth: S ___ M ___ L ___ Adult: S ___ M ___ L ___

If reusing last year's jersey, jersey number = _____

Each parent will be asked to volunteer to make the season the best it can be!!!

Please check mark the areas where you can help. *Coach/team manager commitments are for practice on one day a week after school at the coach's discretion and/or one game on Sat. morning.

___ Coach a team (\$10 discount off registration) Please check this box if you would like to donate your discount back to Peak Soccer. ___ Coach Shirt Size _____

___ Assistant Coach

___ Team Manager (organize snack list, end of season party, and email list for families)

___ Help line fields (Fri before home games)

___ Clean up after home games

Volunteer Signature: _____ Date: _____

Player and Parent Code of Conduct

I, _____, the parent and _____ the player, in consideration of the right granted to me by my registration in the Peak to Peak soccer League, agree to abide by the rules and regulations of Peak to Peak Soccer. I understand that these rules extend to my conduct in all activities related to and during any Peak to Peak Soccer events. I further agree to show good sportsmanship and conduct at all events.

The following actions are encouraged: Positive role modeling for parents and players, clapping for encouragement, using encouraging words, and helping with snacks and water.

Prohibited Actions:

1. Physical or verbal intimidation, including the use of profanity, to any individual.
2. Disrespect to coaches, helpers or other players.
3. Arguing with referees, coaches, helpers, or other players.
4. Willful physical damage to League equipment or facilities.
5. Fighting, pushing, shoving, tripping, pulling clothes, or any other physical action in excess of normal play that can result in injury

Violations can result in suspension of participation in game(s) or even disqualification from participation in the League. Two warnings will be given to player and parent. The third warning will result in game suspension(s) or disqualification to participate in the League depending on the severity of conduct. Determination will be made by the coaches and League Coordinator.

Player's Responsibilities:

1. Show Good Sportsmanship at all times.
2. Set a good example at all times.
3. Be a team player at all times.
4. Do the best you can at all times.
5. Inform your coach whenever you are unable to attend practices or games.
6. Make sure you get a ride from a parent to and from practices. (No Bicycles)
7. And always remember to PLAY HARD, PLAY FAIR, AND HAVE FUN!!!!

Parent's Responsibilities:

I agree to transport my child to practices/games on time. If my child is in the U7 or U9 groups, I will be available to assist my child with shoe changes, snacks, etc.

I HAVE READ AND UNDERSTOOD ALL OF THE ABOVE AND AGREE TO ABIDE
BY THESE RULES.

Player: _____ Date: _____
(Signature)

Parent: _____ Date: _____
(Signature)

Additional Information

*By asking for your child's date of birth, we are making a uniform cut-off date for all three communities (Nederland, Gilpin and Idaho Springs) to create an experience that is fun and safe for all ages. Please remember that "U" means "Under". July 31st is our date that your child must be born on or before to play in each grouping.

U 75-6years olds (born on or before 7/31 or at least starting Kindergarten in the fall)

U 97-8 year olds

U 12....9-11 year olds

U 15....12-14 year olds (Maximum age is 14years old on or before 7/31)

We understand that some children want to and are able to play "up" a level . We leave this decision to parents and/or coaches. There will not, under any circumstances, be a reason why a child will play "down" a level. We feel strongly that "playing down" discourages the values we are trying to instill in our soccer program – learning the game and having a good time doing it!

***** PRACTICES BEGIN THE WEEK OF AUGUST 15. Your child's coach will contact you and let you know the first date of practice. Practices will occur at the Nederland Elementary Fields. Because Peak to Peak Soccer is not affiliated with NES, parents are required to write a note for every practice day stating that the coach (be sure to name who this is) will pick their child up from school. If this is not done, the child will be sent home on the bus or will follow whatever regular routine has been established with the school. Practices start after school. Please meet your child after school to assist with putting on soccer clothing if your child is not independent. Otherwise, coaches will meet kids at the school and walk down to the fields as a group.

***** GAMES BEGIN AUGUST 27 AND CONTINUE THROUGH OCTOBER 8, (NO game on Labor Day Weekend). Make-ups will be held on the field that was originally scheduled for the game. Expect to travel to Idaho Springs for 2 Saturdays, Gilpin for 2 Saturdays and Nederland for 2 Saturdays. Please drive slowly in all neighborhoods. YOUR COACH WILL HAND OUT SCHEDULES AS SOON AS THEY ARE SET. The schedule will also be emailed.

***** ANY OTHER QUESTIONS, PLEASE CALL TEENS, INC @ 303.258.3821 or Tracy Brewer at 303-258-7980.

AMATEUR MINOR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in **Peak to Peak Soccer league/TEENS**, Inc. athletics/sports program and related events and activities, the undersigned:

1. Agree that the parent(s) and/or legal guardian(s) will instruct the minor participant that prior to participating he or she should inspect the facilities and equipment to be used, and if the participant believes anything is unsafe, he or she should immediately advise his or her coach or supervisor of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions, or negligence but the action, inaction and negligence of others, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risks and accepts personal responsibility for the damages following such injury, permanent total disability or death.
4. Release, waive, discharge and covenant not to sue **Peak to Peak Soccer/TEENS, Inc./Town of Nederland**, its affiliated clubs, their representative administrators, directors, agents, and other employees of these organizations, other members/participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors or premises used to conduct the event, all of which are hereinafter referred to as 'releases,' from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death and damage to property caused or alleged to be caused in whole or part by the negligence of the releases or otherwise.

I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

Name of Participant (print) _____

Name of Parent/Guardian _____

Parent/Guardian Relationship (print) _____ Date _____

Signature of Parent/Guardian _____

Address of Member/Participant _____

Telephone Number of Parent/Guardian _____