

NORTHEAST LOUISIANA SOCCER ASSOCIATION 2008-2009 PLAYER REGISTRATION FORM

| | | | | | | | |
|---|---|---|------------------------------|-------------|---|-------------|--|
| PLAYER INFORMATION | FIRST NAME: | | MIDDLE NAME: | | LAST NAME: | | |
| | BIRTHDATE: | | GENDER: | | SCHOOL: | | |
| | TEAM/COACH/FRIEND REQUEST: | | | | | | |
| | EMERGENCY CONTACT: | | | | EMERGENCY PHONE: | | |
| | DOCTOR NAME: | | | | DOCTOR PHONE: | | |
| | MEDICAL CONDITIONS: | | | | NAME OF COACH, IF PLAYED IN 07-08: | | |
| | ** FOR U-11 & OLDER ONLY** Please select the level of soccer: REC _____ Division 1 _____ | | | | | | |
| PARENTAL INFORMATION | PRIMARY GUARDIAN | LAST NAME: | | FIRST NAME: | | DOB (MMDD): | |
| | | OCCUPATION: | | | CAN YOU COACH YES / NO OR ASSIST YES / NO | | |
| | | ADDRESS: | | | | GENDER: | |
| | | CITY: | | STATE: | | ZIP: | |
| | | HOME PHONE: | MOBILE PHONE: | | BUSINESS PHONE: | | |
| | | EMAIL ADDRESS: | | | | | |
| | OTHER GUARDIAN | LAST NAME: | | FIRST NAME: | | DOB (MMDD): | |
| | | OCCUPATION: | | | CAN YOU COACH YES / NO OR ASSIST YES / NO | | |
| | | ADDRESS: | | | | GENDER: | |
| | | CITY: | | STATE: | | ZIP: | |
| | | HOME PHONE: | MOBILE PHONE: | | BUSINESS PHONE: | | |
| | | EMAIL ADDRESS: | | | | | |
| | PARENTAL CONSENT & REFUND POLICY | <p>I, the parent or guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the Northeast Louisiana Soccer Association (NELSA), its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for NELSA accepting the registrant for its soccer programs and activities (the "Programs"), I hereby release, discharge, and/or otherwise indemnify NELSA, its affiliated organizations and sponsors, their employees and associated personnel, including fields and facilities utilized for the Programs, 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.</p> <p>I am also fully aware of the following refund policy: All requests for refunds must be made in writing to NELSA, c/o Joy Carlson at 4112 Webster Street, Monroe, LA 71203. A full refund will be given if the request is received prior to team assignment. Half of the registration fee will be refunded after team assignment, but prior to, the start of the season. ALL REFUNDS WILL BE REDUCED BY ANY AMOUNT ALREADY SPENT ON A PLAYER (for example: If a uniform has already been ordered for the player, the cost of the uniform will be deducted from any refund due). NO REFUNDS WILL BE GIVEN AFTER THE SEASON BEGINS. COST OF UNIFORM IS NOT INCLUDED IN REGISTRATION FEE.</p> | | | | | |
| | | SIGNATURE: _____ | | | | DATE: _____ | |
| (Signature of Parent/Guardian - REQUIRED) | | | | | | | |
| PRIVACY | In the event of game cancellations or other communications may NELSA and its coaches use your email address for notification? | | | | YES | NO | |
| | May we use your NAME (no other information) in our fund raising efforts? | | | | YES | NO | |
| OFFICIAL USE ONLY | CHECK NUMBER: _____ | | TEAM ASSIGNMENT INFORMATION: | | BIRTH CERTIFICATE: | | |
| | AMOUNT: _____ | | AGE DIVISION: _____ | | | | |
| | REGISTRATION # | REGISTRATION DATE | TEAM TYPE: REC | DIVISION 1 | | | |
| | | | TEAM NUMBER: _____ | | | | |

LET'S PLAY SOCCER!

NELSA 2008-2009 Soccer Registration From June 1 through August 8, 2008

Soccer Parents, it's that time again to enroll your child for soccer. NELSA is having its registration for the fall/spring 2008-2009 seasons for Boys and Girls ages 4 to 18 (age determined as of July 31, 2008). The cost for registration (which does not include the uniform fee) will be \$70.00 for U8 and under and \$95.00 for U9 and above. These fees include both the fall and spring seasons. There will be a \$10 discount for each additional child registered in your household. Registration will end on Friday, August 8th. Due to the strict timeline faced for team formation and game scheduling, if your child is not registered by 8/8/08 they will be placed on a wait list and placed accordingly as space allows. Any child registered after August 8th will incur a \$20 late fee.

Also, as always, **NELSA needs coaches!** Each year NELSA struggles to find parents willing to coach a soccer team. Most parents are afraid to coach soccer because they don't know enough about the game. However, the majority of NELSA coaches are parents who have never played the game. We are not looking for someone with a great knowledge of the game, but rather responsible parents who can organize practices and games, hand out schedules, have an end of the year party and communicate with the league rep. NELSA conducts training sessions and also has books and manuals to help any parent learn enough about the game to coach any team from U5 to U19. NELSA has three Coaching Directors, Stacy Lamb and Aaron Cline (Coaches for the women's soccer ULM Warhawks team), as well as, Bruce Deaton (Coach for Ouachita Christian School) to help train parents to coach any level of soccer. So, if you have the time, please volunteer to coach a NELSA soccer team. It is an experience you will never forget.

Please be aware that **if we do not have enough coaches for your child's age group, we will refund fees and return registration forms back to parents, starting with the last to register.** For example, if we only have enough coaches for 60 players, and 70 players sign up, we will refund the last 10 players to register. In other words, they will not be placed on a team. The coach's child will be excluded. Thus, please sign up early if you want to ensure your child a spot on a team. And, if you are able to coach, please do so. We do not want to turn anyone away.

Evaluations for the incoming U7, U9 and U11 players will be held on the following dates at the ULM Soccer Complex:

Thursday, August 14: U7 Boys and Girls at 5:30 pm / U9 Boys and Girls at 6:15 pm / U11 Boys and Girls at 7 pm

Saturday, August 16: U7 Boys and Girls at 9 am / U9 Boys and Girls at 10:15 am / U11 Boys and Girls at 11:30 am

Please mail or deliver your completed registration form, a copy of the birth certificate (if this is your child's first time to play with NELSA), and cash, check or money order to: NELSA, c/o Joy Carlson, 4112 Webster Street, Monroe, LA 71203 or a check or money order to either H. Mickel location. The fall soccer season will begin September 20th and will last approximately 6 weeks. For additional information, please call 361-0103 or visit our web site at www.nelsa.org.

***PLEASE PUT A VALID EMAIL ADDRESS TO HELP IN OUR COMMUNICATIONS**