

NORTHEAST LOUISIANA SOCCER ASSOCIATION 2009-2010 PLAYER REGISTRATION FORM

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|---|---|--|------------------------------|-------------|---|-------------|--|
| 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 08-09: | | |
| | ** 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, P.O. Box 7476, Monroe, LA 71211. 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: _____ | | | | |

NELSA Spring 2010 Soccer Registration From January 4 – January 23, 2010

Soccer Parents, it's that time again to enroll your child for soccer. NELSA is having its registration for the spring 2010 season for Boys and Girls ages 4 to 18 (age determined as of December 31, 2009). Fees are \$50 for U8 and younger and \$75 for U9 and older leagues (plus an online fee assessed if registering online by Active.com). Please see www.nelsa.org for link to Active.com for online registration. Paper forms can be found at www.nelsa.org and H Mickel Sporting Goods in Monroe and West Monroe. Cost of uniforms is not included in fee. There is a \$10 discount for each additional child registered in same household. Parents, please remember that when registering your child for fall soccer, they are automatically placed on the same team for the spring season. No additional registration is required for those children who played fall 2009 soccer. Registration will end on Saturday, January 23, 2010.

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 two Coaching Directors, Stacy Lamb (Coach 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 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, P.O. Box 7476, Monroe, LA 71211 or to either H. Mickel location. The spring soccer season will begin February 13, 2010 and will last approximately 8 weeks. For additional information, please call 361-0103 or visit our web site at www.nelsa.org.

