

Altus Soccer Club Membership Form

Player Information

Full Name: _____

Last
First
M.I.

****Official Birth Certificate REQUIRED for ALL NEW Players****

Date of Birth: _____ Male or Female: _____ Height: _____ Weight: _____

Address: _____

Street Address
Apartment/Unit #

City
State
ZIP Code

Phone: _____ Email _____

List any medical problem or prohibition for player: _____

Mother's Name: _____ Phone Number: _____

Father's Name: _____ Phone Number: _____

Emergency Contact Name & Phone Number: _____

Doctor to notify in case of emergency include phone number: _____

Player History and Uniform Information

Number of prior seasons played: _____ Previous League: _____

Previous Team: _____ Date of Last Season: _____

Shirt Size:								
	YXSM	YSM	YMED	YLG	ASM	AMED	ALG	AXL
	3-4	5-6	7-8	9-10				

Short Size:								
	YXSM	YSM	YMED	YLG	ASM	AMED	ALG	AXL
	3-4	5-6	7-8	9-10				

Sock Size:	Youth		Junior	Adult	
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Please KEEP uniform from Fall season if planning to play in Spring, same uniform will be used.

Parent signatures required on pages 2 & 3

Disclaimers and Signatures

CONSENT FOR MEDICAL TREATMENT (MINOR)

As the parent or legal guardian of the above-named player, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

Signature of Parent: _____ Date: _____

Address: _____
 City, State, _____
 Zip code: _____

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the USYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the USYSA accepting the registrant for its soccer programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify the USYSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of 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.

Name: _____ Date: _____

Signature: _____

Parental Support: We ask for active participation of all parents in our program, please indicate area(s) in which you would be willing to help.

Coach	Asst. Coach	Team Manager	Team Parent	Special Projects	Field Preparation	Snack Bar	Board Member
Publicity	Committee	Fund Raising	Clerical	Newsletter	Reporter	Other:	

OFFICIAL USE ONLY:

Birth Certificate Received:	YES <input checked="" type="radio"/>	NO <input checked="" type="radio"/>	\$50.00 fee per player. Extra uniform top \$10.00				
Payment Received:	CASH	CHECK #	AMOUNT PAID: \$				
Other Fees:	CASH	CHECK #	AMOUNT PAID: \$	DESCRIPTION:			

Received By: _____ Date: _____

League Name: _____ Age Group: _____ Division: _____

Club/ Team Name: _____

Use Code Only:

Region	State	District	League	Club	Team	Recreation - R Competitive - C
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ALTUS SOCCER CLUB
P.O. BOX 68
Altus, OK 73522
Email: Altus.Soccer@gmail.com
Www.AltusSoccer.com

PLAYER'S NAME: _____

First & Last Name – One form for each player required

SOCCER PARENT/ COACH CODE OF CONDUCT

1. I will NOT force my child participate in soccer
2. I will remember that my child participates in soccer to have fun and that the game is for youth, NOT adults.
3. I will inform the coaching staff of any physical disabilities or ailment that may affect the safety of my child or the safety of others.
4. I will learn the Laws of the Game and the policies of the Altus Soccer Club league.
5. I (and my guests) will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy, and by demonstrating support for all players, coaches, referees, assistant referees, and spectators at every game and practice.
6. I (and my guests) will not engage in any kind of unsporting conduct with any referee, assistant referee, coach, player, or parent such as booing and taunting; refusing to shake hands; or using profane language or gestures.
7. I will not encourage any behavior or practices that would endanger the health and well-being of the athletes.
8. I will teach my child to play by the laws of the game and to resolve conflicts without resorting to hostility or violence.
9. I will demand that my child treat other players, coaches, referees, assistant referees, and spectators with respect regardless of race, creed, color, sex or ability.
10. I will teach my child that doing one's best is more important than winning so that my child will never feel defeated by the outcome of the game or his/her performance.
11. I will praise my child for competing, trying hard and make my child feel like a winner every time.
12. I will never ridicule or yell at my child or other participants for making a mistake or losing a competition.
13. I will emphasize skill development and practices and how they benefit my child over winning.
14. I will promote the emotional and physical well-being of the athletes ahead of any personal desire I may have for my child to win.
15. I will respect the referees, assistant referees, and their authority during games, will never question, discuss or confront coaches at the game field, and will take time to speak with coaches at an agreed time and place.
16. I will demand a sports environment for my child that is free from drugs, tobacco, alcohol and I will refrain from their use at all sports events.
17. I will refrain from coaching my child or other players during games and practices unless I am one of the official team coaches.
18. I will refrain from bringing pets to the soccer complex during practices or games. ONLY Service animals are permitted to be on the fields during practices or games. Anyone with a pet will be asked to remove the animal from the complex.

I also agree that if I fail to abide by the aforementioned rules and guidelines, I will be subject to disciplinary action that could include but is not limited to the following:

Verbal warning by the head coach, field marshal, or any Altus Soccer Club Board Member.

Written warning.

Parental game suspension with written documentation of incident kept on file by Altus Soccer Club.

Game forfeit through the referee.

Parental season suspension.

SIGNATURES OF PARENT/GUARDIAN:
(Coaches must complete a form also if not completed as a parent.)

Print and Sign Your Name Parent 1/Guardian 1 Signature Date