



Fort Wayne Sport Club

Fall 2011 Recreational Registration



FWSC is a non-profit, 501(c)3 organization, that provides a recreational soccer program for players ages 3-14 from the greater Fort Wayne area. The focus of the recreational program is to provide a positive environment designed to allow players of all levels to have fun while learning the game of soccer.

Fall 2011 – Recreational Soccer Season

BEGINS: Sept. 10

ENDS: October 15

There is one game each week on Saturday. League begins Saturday September 10 and will run for 6 weeks with final games on Saturday, October 15. All games will be played between 9:00 am and 11:45 am. Shin guards are mandatory (cleats recommended but are optional). Practices for u8 (6:00) and u10 (7:00) on Tuesdays, u12 (6:00) and u14 (7:00) on Thursdays.



LIMITED NUMBER OF PARTICIPANTS: The number of players we can accept into the program is limited and registration will be closed as each group is filled. It is the intent of FWSC to equally balance all teams for fair play. You may request to play for a certain coach or to play with **ONE** friend or relative. Please remember all age groups play at the same time so carpooling should not be a challenge. Playing against your friends can be as much fun as playing with them.

****PLACEMENT ON A SPECIFIC TEAM IS NOT GUARANTEED.**

Volunteer Coaches:

The Head Coach's child for each team will play for no fee (not including the uniform cost). The Head Coach must agree to be at most practices and games. Also, the Head Coach will be required to complete a certification course (paid for by the club) to be given on site at a latter date or complete a course on line.

Assistant Coaches are encouraged for each team. They can take the certification course also (at no cost). They will be considered first for any future vacancies for head coaches.

Please indicate on this form if you wish to be considered for either of these positions.

Circle One

Name _____ Head Coach Assistant Coach

Team Assignments:

All participants will receive their information by email (please make sure that your email address is correct and legible) by September 3rd. If you have not been notified by then, contact us at rec@fortwaynesportclub.com or call 704-8098 to find your team placement.

Practices (Training)

All practices are conducted by our REC TECHNICAL DIRECTOR (Matt Hein). Coaches should attend to assist in the training. Attendance by players is greatly encouraged to increase skill development.

HOW TO REGISTER:

- 1) Complete Registration Form
- 2) Enclose check for \$65.00 (Payable to: FWSC Youth Soccer)
(PLEASE ADD \$15.00 IF UNIFORM NEEDED)
(\$10.00 discount for members of FWSC)
- 3) Enclose a copy of the child's birth certificate, for first time players with FWSC

WHERE TO REGISTER:

Mail to: FWSC Youth League, 3102 Ardmore Ave, Fort Wayne, IN 46802
Drop Box at: FWSC, 3102 Ardmore Ave., Fort Wayne, IN 46802 (checks only please)
REGISTER IN PERSON at the FWSC on:

Saturday, August 27th, 2011 from 10:00 a.m. to 12:00 p.m.

Deadline: August 27th



Late registration will be accepted on a space availability basis, with \$10.00 late fee payment after 8-27-2011

Extra forms are available at the club (front entrance or main gate).



Fort Wayne Sport Club Youth Soccer Fall 2011 Registration



Deadline: August 27th

Late registration will be accepted on an availability basis, with \$10.00 late fee payment after 8-27-2011

Age Chart---Select One					
**To play out of your age group, a letter requesting to do so must be submitted along with this application. Please indicate your reasons for this request (height, weight, skill level, etc).					
Division	Date of Birth	Check	Division	Date of Birth	Check
U4	8-1-07 to 7-31-09		U10	8-1-01 to 7-31-03	
U6	8-1-05 to 7-31-07		U12	8-1-99 to 7-31-01	
U8	8-1-03 to 7-31-05		U14	8-1-97 to 7-31-99	

FEES : \$65.00 + \$15.00 for uniform (if needed) = \$80.00

(There will be a \$10.00 discount for members of FWSC only.)

Uniform consists of shirt and socks. Please add \$15.00 if uniform is needed. Uniforms are the same from the 2010 seasons and the 2011 spring and summer seasons and can be used in all future seasons (one time cost).

Player Contact Information

Returning Player: <input type="checkbox"/> New Player: <input type="checkbox"/> (copy of birth certificate needed for new players)	Last Name: _____ First Name: _____ Address: _____ City: _____ Preferred to be called (nickname): _____ Zip: _____ Gender: (M or F) _____ Birth Date: ____/____/____ Contact Home Phone: _____ Email: _____ Father's Name _____ Alt Phone # _____ Mother's Name _____ Alt Phone # _____
--	---

Promotional Release:

By registering my child, I'm allowing FWSC & its affiliates to use photos that my child may be in for promotional materials, newsletters, etc as FWSC deems suitable. I understand any photos will be the sole property of FWSC & **WILL NOT** be used in any other manner.

Initial _____

If uniform is needed, please circle below. Cost for uniform is \$15.00.

Check here if you already have a uniform:

Shirt Size	Youth Sizes				Adult Sizes			
	S	M	L	XL	S	M	L	XL

Sock Size	Youth	Adult

Consent to Play:	Medical Release:
<p>I, the parent /guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of FWSC, its affiliated organizations & sponsors. Recognizing the possibility of physical injury associated with soccer & in consideration of FWSC accepting the registrant for its soccer program & activities, I hereby release, discharge, and/or otherwise indemnify FWSC, its affiliated organizations, sponsors, associated volunteers and personnel, including the owners of the fields and facilities utilized for this program, against any claim by or on behalf of the registrant as a result of the registrant's participation.</p> <p>_____ (Signature of parent or legal guardian)</p>	<p>As the parent or legal guardian of the above-named player, I hereby give my 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 life, limb, or well-being of my dependant.</p> <p>_____ (Signature of parent or legal guardian)</p> <p>Please Note any medical problems: _____</p> <p>_____</p>

