

LACOMBE SOCCER CLUB

2017/2018 INDOOR SOCCER REGISTRATION

REGISTRATION: SEPTEMBER 13th from 4:00- 7:30PM

at the Active Living Fair

All pertinent information on this form **MUST** be completed for this registration to be accepted with payment included: Make Cheques out to **Lacombe Soccer Club**

Please circle the age group your child will be playing in:

U-18 (2000/2001)	\$170
U-16 (2002/2003)	\$170
U-14 (2004/2005)	\$170
U-12 (2006/2007)	\$170
U-10 Development (2008/2009)	\$170
U-8 (2010/2011)	\$100
U-6 (2012/2013)	\$100

All players require shin pads
& suitable indoor soccer shoes.

2017/2018 Lacombe Indoor Soccer Registration Form

Player's Name: _____ Gender: _____ DOB: ____ / ____ / ____
dd mm yy

Age Level: U- _____ Phone Number: _____ Alternate Number: _____

Address: _____ Postal Code: _____

Email Address: _____

In consideration of Lacombe Soccer Club accepting this registration and thereby allowing my child to participate in the affairs of the association, I for myself, my heirs, administrators, successors, and assigns, hereby waive my or my child's rights to damages as against and release from any claim for damages the LSC or any other officer, agent, servant, or member thereof with respect to any claim that I or my child might have arising from any soccer event or activities whatsoever sort in which I or my child are involved in, for any or all injuries in which may be suffered in this regard. I have read the above document and signify my understanding of the agreement.

Guardian's Name (please print): _____

Guardian's Signature: _____ Date: _____

Payment: Cash _____ Cheque# _____

VOLUNTEER POSITIONS

The success of this program is dependent upon everyone's volunteer support, so please indicate where you would be willing to help.

PLEASE CHECK AT LEAST ONE:

Coach: _____ Assistant Coach: _____ Team Manager: _____ Parent Helper: _____

Coaching positions must be filled for team to be formed and scheduled to play.

CENTRAL ALBERTA SOCCER ASSOCIATION

PARENTS/SPECTATORS CODE OF CONDUCT

1. I will have respect for the authority of the referee and his/her assistants. I will not harass, abuse or berate the referee during or after the match. I shall not enter the field of play without the referee's permission.
2. I will have respect for the coaches and the time they have put in for the sake of the children, I will not verbally abuse or berate them at any time.
3. I will have respect for all players. Cheer in a positive manner. Encourage my team and not berate the other team. I will cheer in a way to reward good play for both teams and promote fair play.
4. I will not use foul or abusive language towards anyone for any reason.
5. I have a responsibility to learn the laws of the game, and the spirit of the game.
6. Parents are encouraged to be involved with the organization and promote the game in a positive way.
7. I must demonstrate the utmost in sportsmanship and integrity as I am the role model for my children.

Parents Name & Signatures:

NAME: _____ SIGNATURE: _____ DATE: _____
NAME: _____ SIGNATURE: _____ DATE: _____
NAME: _____ SIGNATURE: _____ DATE: _____
NAME: _____ SIGNATURE: _____ DATE: _____

PLAYERS CODE OF CONDUCT

1. I will play within the laws and spirit of the game
2. I am expected to be on time and prepared for matches and training sessions.
3. I will display self control in all situations and will not use foul or abusive language at any time before, during, or after a match or training session.
4. I will train and play to the best of my ability, have a positive attitude and encourage others to do the same.
5. I will show respect towards the referee and his/her assistants as well as towards the opponents. I will not harass, abuse, or berate a referee for any reason.

Players Name & Signature:

NAME: _____ SIGNATURE: _____ DATE: _____