

Smithsburg Youth Athletics (SYA)

Fall Soccer Sign-Ups for 2010

Travel League Soccer

*Deadline for registration is **July 21st** (registrations accepted after that date add \$20.00 and will only be accepted if there is space available)*

Registration Fee is **\$110.00*** per player (**\$85.00** for returning players that do not need a new uniform) for U10, U12, and U14

*This includes: Soccer socks, shorts, jersey (for players to keep)

Under 10 (U10): born between 8 / 1 / 2000 and 7 / 31 / 2002

Under 12 (U12): born between 8 / 1 / 1998 and 7 / 31 / 2000

Under 14 (U14): born between 8 / 1 / 1996 and 7 / 31 / 1998

U10 & U12 Travel Teams will practice and play home games at Lion's Club Park, Old Forge Elementary, Brook Lane and Veteran's Park in Smithsburg.
U14 will practice and play home games at the Smithsburg High School and Brook Lane.
Away Games will be at schools and parks in Washington and Frederick Counties

In-House League Soccer

*Deadline for registration is **July 28th** (registrations accepted after that date add \$20.00) and will only be excepted if there is space available)*

Registration Fee is **\$40.00*** per player for U6, and U8

*This includes: Soccer Socks and Shirt (for players to keep) – *shorts not included*

Under 6 (U6): born between 8 / 1 / 2004 and 7 / 31 / 2006

Under 8 (U8): born between 8 / 1 / 2002 and 7 / 31 / 2004

U6 & U8 will practice and play their games at Smithsburg Elementary School

Ways to Register

Website

Visit us at www.smithsburgyouthathletics.org
(download registration forms, fill it out and mail it in)

In person

Wednesday	July 7, 2010	6:00 – 8:00 pm	Smithsburg Fire Hall
Saturday	July 10, 2010	9:00 – 11:00 am	Smithsburg Fire Hall
Wednesday	July 14, 2010	6:00 – 8:00 pm	Smithsburg Fire Hall
Saturday	July 17, 2010	9:00 – 11:00 am	Smithsburg Fire Hall

soccer@smithsburgyouthathletics.org

(301) 824-7707

***** Registration Scholarships available based upon the F.A.R.M. program *****

SMITHSBURG YOUTH ATHLETICS FALL 2010 SOCCER REGISTRATION

Last Name	First Name	Age as of 8/1/10	Team (Admin Use)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Address

City	State	Zip	Phone
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Gender	Birth date	E-mail
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Mother's Name	Mother's Cell/Work
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Father's Name	Father's Cell/Work
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Insurance Company	Policy Number	Doctor's Name and Number
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Special Medical / Allergies / Medications

<p>MARK ONE</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> IN-HOUSE</td> <td style="text-align: right;">\$40.00</td> </tr> <tr> <td><input type="checkbox"/> TRAVEL</td> <td style="text-align: right;">\$85.00</td> </tr> <tr> <td><input type="checkbox"/> TRAVEL W/ UNIFORM</td> <td style="text-align: right;">\$110.00</td> </tr> </table>	<input type="checkbox"/> IN-HOUSE	\$40.00	<input type="checkbox"/> TRAVEL	\$85.00	<input type="checkbox"/> TRAVEL W/ UNIFORM	\$110.00	<p>UNIFORM SIZES: PLEASE INDICATE SIZE FROM YOUTH TO ADULT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="7">SHORT (Travel Only)</th> <th colspan="7">JERSEY</th> </tr> <tr> <th>YS</th><th>YM</th><th>YL</th><th>AS</th><th>AM</th><th>AL</th><th>AXL</th> <th>YS</th><th>YM</th><th>YL</th><th>AS</th><th>AM</th><th>AL</th><th>AXL</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </tbody> </table>	SHORT (Travel Only)							JERSEY							YS	YM	YL	AS	AM	AL	AXL	YS	YM	YL	AS	AM	AL	AXL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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VOLUNTEER INTEREST

<input type="checkbox"/> Head Coach	<input type="checkbox"/> Asst Coach	<input type="checkbox"/> Team Manager	<input type="checkbox"/> Field
<input type="checkbox"/> Referee	<input type="checkbox"/> Field Marshall	<input type="checkbox"/> Fundraiser	<input type="checkbox"/> Concession

REGISTRATION DEADLINES:
TRAVEL: JULY 21, 2010 IN-HOUSE: JULY 28, 2010

Late Registrations excepted after the deadline will be increased by \$20 (will only be accepted if a team is not full)

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 provide for the well being of the dependent. Consent is given for this player to ride to or from practices, games with another parent or Smithsburg Youth Athletics volunteer. As the parent or legal guardian of the above named player, I hereby assume full responsibility for any and all injuries incurred due to the player's participation in competition, practice, and travel games. I absolve all coaches, volunteers and officials in the event of injury or illness to the player.

Parent or Legal Guardian Signature

Date Signed

Please complete and return this form. Along with a copy of the player birth certificate and waiver form if registering for a Travel Team. Make Check payable to: SYA

Mail to: SYA c/o Soccer Registration
P.O. Box 21
Smithsburg, MD

Please Visit Our Website At: www.smithsburgyouthathletics.com