



## Registration Form

Please completely fill out, sign, and bring this registration form along with a money order, check, debit or credit card in the amount of \$85.00 made payable to "Little Superstar Soccer"

\*Please remember that your child will be required to bring to every session a soccer ball (size \_\_\_\_), shin-pads, & water

### PLAYER INFORMATION: (please print):

Player/Child's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: Male \_\_\_ Female \_\_\_

Please check the age group your child will be playing in below (the league will be co-ed for the first season until we grow in number):  
\_\_ 3-5 year olds \_\_ 6-7 year olds \_\_ 8-9 year olds \_\_ 10-11 year olds

Please check the uniform size that your child will need below (includes jersey, shorts and socks):

**Shirts:** Youth XSmall (YXS) \_\_ Youth Small (YS) \_\_ Youth Medium (YM) \_\_ Youth Large (YL) \_\_ Adult Small (S) \_\_ Adult Medium (M)

**Shorts:** Youth XSmall (YXS) \_\_ Youth Small (YS) \_\_ Youth Medium (YM) \_\_ Youth Large (YL) \_\_ Adult Small (S) \_\_ Adult Medium (M)

Please list below any physical or medical conditions (ex: allergies) that may require special consideration:

---

### PARENT/GUARDIAN INFORMATION: (please print):

Parent/Guardian's First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Parent / Guardian **email:** \_\_\_\_\_ Phone number Home: ( ) \_\_\_\_\_ - \_\_\_\_\_ Cell: ( ) \_\_\_\_\_ - \_\_\_\_\_

### VOLUNTEER COACH RESPONSE (without your help the league can not work!)

**Purpose:** We believe that volunteer parents do a great job of coaching the children in soccer; because you have an invested interest; your child.

**Experience:** You DO NOT need to know anything about soccer to be a coach. We will provide a concise coaching session (along with a coaching booklet) for you that will help you coach your child's team. The league's intent is to provide soccer for the children in a fun-loving environment with the emphasis on fun & child early skill development. Hence there should be no pressure on the volunteer coach.

**Functions/Duties:** **The content for each practice will be laid out for you in a booklet.** The parent-coaches facilitate practice according to the schedule set out in the coaching manual. The coaches help in matches by substituting players, calling fouls, & helping on restarts.

I will work with my child's team as a (please check one of the following):

\_\_\_ **Head Coach** (that is, I am willing to coach a team by myself)...Your Name: \_\_\_\_\_

\_\_\_ **Co-Coach** (that is, I am willing to coach a team but may not always be able to be there. If paired with another parent coach we can make this work).....Your Name: \_\_\_\_\_

**Practice:** I understand that I am solely responsible for knowing the date & time of practice and that no one is going to call me regarding this matter. I received the practice time & dates on the general information sheet at the sign-ups or have decided to look up the information at [www.littlesuperstarsoccer.com](http://www.littlesuperstarsoccer.com) I understand that an attempt will be made to send an e-mail to remind me of the first practice, but I am not to rely on this as my source.

**Sportsmanship:** I understand that un-sportsman like conduct exhibited by myself, my child, and/or my extended family will result in disciplinary action up to and including expulsion of the player from the league (refer to Conduct Guidelines).

---

**Disclaimer:** By signing below I give International Futbol Association & City of Memphis Parks and Neighborhoods, permission to register my son/daughter to play for the above mentioned soccer program. I (we) the parent/legal guardian of the player, a minor, agree that the player and I (we) will abide by the rules and regulations outlined by the establishment, soccer program, and coach. Recognizing the possibility of physical injury associated with soccer and in consideration to International Futbol Association, City of Memphis Parks and Neighborhoods, and/or its employees or representatives against any claim by or on behalf of the registrant as a result of their participation in the program.

**Insurance:** International Futbol Association and/or City of Memphis Parks and Neighborhoods, do not provide Accident health insurance to any individual. Participants are encouraged to obtain their own insurance coverage prior to and for the duration of the soccer season from their own insurance agent. By applying for this program, the registrant realizes the inherent risks involved and appreciates the nature of risk and will hold harmless International Futbol Association, City of Memphis Parks and Neighborhoods, it's Officers, Board members, Director, Employees and Agents of any damages caused by participation in this program

\_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Legal Guardian's Signature

