



Lake Wales Soccer Club

Boys' and Girls' Competitive Soccer

www.lakewallessoccer.com

(863) 676-3304 or 863-678-3513

Lake Wales Soccer Club Fury Player & Parent Contract

Congratulations on being selected to join the **FURY** for the 2019-20 Seasonal Year! Your skills and hard work have earned you a spot on one of our soccer club teams. Our Coaches and Board of Directors hope this will be an enjoyable year for you and your family. As part of the registration process, we want to ensure that you are fully aware and understand the commitments the **LWSC** makes to you, and what our expectations and obligations from you as a result of you accepting the position offered to you.

- Although it is our intent to honor the commitment to play with the **FURY** for the entire season, we understand that accepting the position offered and completing the registration documents obligates me to pay the full registration fees of \$300.00 plus a \$100 uniform fee, regardless of whether I decide to leave the **FURY** prior to the end of the seasonal year. Seasonal year is from August 1, 2019 to May 31, 2020.
- We agree to make all installments toward fulfilling our financial obligation as determined by the team manager.
- We understand that the player registration fees cover the cost of playing in the USA league, referee fees, LWSC fees, FYSA fees, Region C tournament, training and training equipment for the team and the minimum uniform requirement consisting of (2) jerseys (1)short and (2) socks. We understand that we will be responsible for all travel expenses, any pre and post season tournaments and extra team uniforms. The team may do fundraiser to help defer these cost.
- We understand that since this is a premier competitive environment, there is **NO** guarantee of minimum playing time. We also understand and agree to abide by the **LWSC** policy of players to guest play with other teams or members of other teams to guest play with **LWSC** teams, except with the express written approval of the Registrar, President, or Director of Competitive.
- I also understand that if I am dissatisfied with the **LWSC** and/or my team, my first avenue of satisfaction will be with the coach of the team. If still not satisfied, I may contact the Director of Competitive Teams (DOCT), Vince Delgado at (863) 221-8193.

FYSA CODE OF ETHICS

Players

- I will encourage good sportsmanship from fellow players, coaches, officials and parents at all times.
- I will remember that soccer is an opportunity to learn and have fun.
- I deserve to play in an environment that is free of drugs, tobacco, and alcohol; and expect everyone to refrain from their use at all soccer games.
- I will do the best I can each day, remembering that all players have talents and weaknesses the same as I do.
- I will treat my coaches, other players and coaches, game officials, other administrators, and fans with respect at all times; regardless of race, sex, creed, or abilities, and I will expect to be treated accordingly.
- I will concentrate on playing soccer. Always giving my best effort.
- I will play by the rules at all times.
- I will at all times control my temper, resisting the temptation of retaliation.
- I will always exercise self-control.
- My conduct during competition towards play of the game and all officials shall be in accordance with appropriate behavior and in accordance with FIFA's "Laws of the Game," and in adherence to FYSA rules.
- While traveling, I shall conduct myself so as to bring credit to myself, my team and my league.

- I shall not possess, consume or distribute before, during or after any game or at any other time at the field and/or game complex alcohol, tobacco, illegal drugs or unauthorized prescription drugs.
- I will never use abusive or insulting language. I will treat everyone with dignity.

Coaches/Volunteers

- I will never place the value of winning before the safety and welfare of all players.
- I will always show respect for players, other coaches, and game officials.
- I will lead by example, demonstrating fair play and sportsmanship at all times.
- I will demonstrate knowledge of the rules of the game, and teach these rules to my players.
- I will never use abusive or insulting language. I will treat everyone with dignity.
- I will not tolerate inappropriate behavior, regardless of the situation.
- I will not allow the use of anabolic agents or stimulants, drugs, tobacco, or alcohol by any of my players.
- I will never knowingly jeopardize the eligibility and participation of a student-athlete.
- Youth have a greater need for example than criticism. I will be the primary soccer role model.
- I will at all times conduct myself in a positive manner.
- Coaching is motivating players to produce their best effort, inspiring players to learn, and encouraging players to be winners.
- My actions on sidelines during games shall be in the spirit of “good sportsmanship” at all times. Profanity, profane gestures, arguing, inciting disruptive behavior by spectators and/or players, or any conduct not in the spirit of good sportsmanship, shall require disciplinary action from the affiliate.
- I shall not possess, consume or distribute before, during or after any game or at any other time at the field and/or game complex alcohol, tobacco, illegal drugs or unauthorized prescription drugs. I will refrain from any activity or conduct that may be detrimental or reflect adversely upon FYSA, its members or its programs.
- I will accurately and completely complete the coach/volunteer application form and by signing attest to the accuracy of the information submitted.

Parents/Spectators

- I will encourage good sportsmanship by demonstrating positive support for all players, coaches, game officials, and administrators at all times.
- I will place the emotional and physical well-being of all players ahead of any personal desire to win.
- I will support the coaches, officials, and administrators working with my child, in order to encourage a positive and enjoyable experience for all.
- I will remember that the game is for the players, not for the adults.
- I will ask my child to treat other players, coaches, game officials, administrators, and fans with respect.
- I will always be positive.
- I will always allow the coach to be the only coach.
- I will not get into arguments with the opposing team’s parents, players, or coaches.
- I will not come onto the field for any reason during the game.
- I will not criticize game officials.
- I shall not possess, consume or distribute before, during or after any game or at any other time at the field and/or game complex alcohol, tobacco, illegal drugs or unauthorized prescription drugs.
- I will refrain from any activity or conduct that may be detrimental or reflect adversely upon FYSA, its members or its programs.

Failure to comply may result in the suspension of your privilege to participate in FYSA sanctioned events, for the following periods:

1st offense -- suspension for a minimum of thirty (30) days to a maximum of five (5) years.

2nd offense -- suspension for a minimum of one (1) year to a maximum of ten (10) years.

3rd offense -- suspension for a minimum of five (5) years to a maximum of fifty (50) years.

NOTE: Any individual charged with a violation of this Code of Ethics shall be afforded due process as defined in FYSA’s Rule Section 600 before the implementation of any suspension.

- We have received and read the FYSA Code of Ethics as printed above, and by our signatures below, agree to abide by the requirements. We will act in a manner of respect at all practices, games, travel, etc. and serve as role models to others to maintain the integrity of ourselves, our team, and all of **FURY**. Players will conduct themselves in accordance with **FURY**, FYSA, USYSA, USSF, and FIFA rules at all games, or will be subject to disciplinary action.

Parent’s Signature: _____ Player’s Signature _____

FYSA ACKNOWLEDGMENT OF REGISTRATION

(FYSA RECOMMENDS THAT PLAYERS NOT REGISTER TO A TEAM WHOSE AGE GROUP EXCEEDS THE PLAYERS NORMAL AGE.)

Competitive Player 2019-2020 Season Soccer Registration Form

A copy of each player's birth certificate is required along with this registration in order to register each player with the Florida Youth Soccer Association (FYSA). Each player will have medical insurance coverage through the FYSA while playing and practicing with the team.

Last Name: _____ First Name: _____ M.I. _____

Home Address: _____ City: _____ Zip _____

E-mail Addresses: _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ Age Group: _____

Male or Female: M or F (circle one) U.S. Citizen: YES or NO

Mother's Name: _____ Cell Phone: _____

Father's Name: _____ Cell Phone: _____

Mandatory Medical Information / Release:

Does the child on this form have any medical problems that may prohibit him/her from playing soccer?
YES NO (If yes, a written medical release from a licensed physician is required before the child can be assigned to a team.)

Insurance Notice:

All injuries must be reported within 90 days of the injury.

Does the player have medical/dental insurance? YES NO

Insurance Company: _____ Policy Number: _____

Informed Consent:

I, the parent/guardian of the registrant and/or registrant, agree that we will abide by the rules of the club/league, the state association (FYSA) and all of its affiliated organizations. My child wishes to participate in soccer during the season of this registration. I realize risks are involved in my child's participation. I understand that the risk to my child includes a full range of injuries from minor to severe, and the result could be death, paralysis, or other serious, permanent disability. I accept this risk as a condition of my child's participation. I, as parent or guardian of the above named child, and/or I, the player (if not a minor), do hereby release and discharge the Lake Wales Soccer Club and their employees, volunteers, sponsors, and all personnel involved in organizing, coaching, and operating the soccer program from all claims arising from my child's participation in the program.

Concussion

I, the parent/guardian of the registrant and/or registrant, acknowledge that I have been given an Informed Consent form about concussions and head injuries, and I have executed this form. I understand the risks associated with such injuries, I volunteer to participate, and my signature below indicates my consent to participate.

Fury Contract and FYSA Code of Ethics

I the parent/guardian of the registrant, and/or registrant, have read the above Fury Contract and FYSA Code of Ethics and agree we will abide by the terms set forth.

Your signatures below indicate that you have read, understand, and agree to abide by the statements set forth herein.

Printed Name of Parent / Guardian: _____

Parent / Guardian Signature: _____ Date: _____

Player Signature: _____ Date: _____

Coach's Signature: _____ Date: _____

Season Registration Fee for Players:

TOTAL: \$300.00 + \$100 Uniform Fee