



United Valley Soccer Association

Spring Registration Form



Player Name: _____ Sex: _____ Home Phone #: _____

Address: _____ City: _____ Zip: _____

Birth Date: _____ Age: _____ Mother: _____ Father: _____

Email Address: _____ Cell Phone #(s): _____

Registration Fees:
All age levels: \$65.00 per child
Make checks payable to: UVSA *Returned checks will be charged \$25.00*

I am the parent/guardian of the above named minor child (player). I hereby grant my permissions for him/her to participate in the soccer program sponsored by United Valley Soccer Association.

I hereby grant my permission for my child to be treated by a Medical Doctor, Physician Assistant, Nurse Practitioner, Athletic Trainer, EMT/Paramedic, and/or Nurse in case of injury or illness and I cannot be reached.

We hereby agree that the Soccer Association for Youth (SAY) its members, coaches or officers shall not be liable for any injury or loss which my child may sustain while participating in activities of any kind whether sponsored by or under the supervision of SAY, and we agree to indemnify and to hold harmless SAY, its members, coaches, officers or designates of any kind from any claim whatsoever.

Signature of Parent/Guardian Date: _____

Medical/Insurance Information:

Insurance Co: _____ Name of Insured: _____

Group #: _____ Policy #: _____

Medical Conditions (include medications, allergies, asthma, heart conditions, diabetes, and seizure disorder):

Hospital Preference: _____

Secondary Emergency Contact Persons (OTHER THAN PARENTS):

Name: _____ Phone: _____

Name: _____ Phone: _____

UVSA requires a copy of a birth certificate for each NEW player registration.

Amount Paid: _____ Check #: _____ Cash: _____ BC: _____

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United Valley Soccer Association



Spring Uniform Order Form

Player Name: _____ Birth Date: _____

Parent/Guardian Name(s): _____ Phone: _____

UNIFORM: Includes jersey and socks.

UVSA will not be held responsible for uniforms ordered in an incorrect size by the parent/guardian. Sizing samples are available.

JERSEY – Youth Sizes

Adult Sizes

YXS YS YM YL

AS AM AL AXL

PARENTS – Please complete the survey below.

Please check if you would be willing to volunteer for any of the following:

Coaching: Yes _____ No _____

If yes, which age level: U10 _____ U12 _____ U14 _____ U16 _____ U19 _____

Referee games at the field: Yes _____ No _____

If you do not wish to referee games, do you know anyone who would be willing to referee?
Please list their names and phone numbers.

FUNDRAISING – Please read the following information.

In an effort to maintain a low-cost soccer program, United Valley Soccer Association reserves the right to conduct a fundraising campaign during each spring and/or fall season. It is important for all families to participate in fundraising campaigns each year in order to provide low registration costs along with the necessary funds for the on-going maintenance and improvements being made to UVSA's Pottery Field complex.

I hereby accept responsibility for all fundraising material given to my child by UVSA.

Signature of Parent/Guardian _____ Date: _____

Player Names: _____

Parent's Code of Conduct

I hereby pledge to provide positive support, care, and encouragement for my child participating in United Valley Soccer by following this Parent's Code of Ethics:

I will encourage good sportsmanship by demonstrating positive support for all players, coaches and officials at every game and practice.

I will place the emotional and physical well being of my child ahead of my personal desire to win.

I will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.

I will demand a sports environment for my child that is free from drugs, tobacco and alcohol and will refrain from their use at all youth soccer events.

I will remember that the game is for youth – not adults.

I will do my very best to make youth sports fun for my child.

My child and I will treat other players, coaches, fans and officials with respect.

I will help my child to enjoy the youth soccer experience by doing whatever I can, such as being a respectful fan and assisting the coach as needed.

General Rules

Spectators are to remain behind the spectator lines at all times.

Spectators who harass players, coaches or officials will be asked to leave.

Prohibited at the fields are alcohol, tobacco, drugs, profanity and animals of any type.

Children should be supervised at all times.

By signing below I state that I have read and agree to abide by the above Code of Conduct and General Rules.

_____ Date: _____
Signature of Parent/Guardian

Consent for Use of Photographs

By signing below, I agree that photographs taken of my child, while he or she is participating in United Valley Soccer Association activities, by United Valley Soccer Association will be the property of United Valley Soccer Association. These photos may be used in newspapers, advertising brochures, unitedvalleysoccer.com and UVSA's Facebook page.

No names will be used with photographs in order to protect your child's identity.

By not signing below, I am declining the use of photographs of my child.

_____ Date: _____
Signature of Parent/Guardian