HSA-SA

Kids League Soccer REGISTRATION

NOTE: Fee Amounts: \$ 45.00 per player

REGISTRATION MUST BE ACCOMPANIED WITH PAYMENT, and GIVEN to FRONT OFFICE NO LATER THAN *September 20, 2013*

Child must be in grades Kinder-5th grade to participate in the 2013 season . Please fill out this application form (one per player), make check payable to HSA-SA deliver to:

Front office

PLAYER INFORMATION

| Last Name | First Name_ | | Middle Initial | |
|---|--------------|-----|---|--------------|
| Address | City | | State | Zip Code |
| Birthdate | Sex (M/F) | Age | Telephone Num | ber |
| Parent/Guardian #1 | | | Parent/Guardian #. | 2 |
| First Name : | | | First Name: | |
| Address: | | | Address: | |
| City: | | | City: | |
| State: | State: | | | |
| Email Address: | | | Email Address: | |
| Telephone Number: | | | _Telephone Number: | |
| If you can volunteer, check all that apply: | | | If you can volunteer, check all that apply: | |
| Coach Assistant | Coach | | Coach Assistant | Coach |
| Board Positionl | Field Helper | | Board Position | Field Helper |
| INFORMED CONSENT FORM | | | | |

I, the parent of the above named child, hereby give my permission and authorization for _______(name of child) to participate as a player in the HSA-SA Soccer Kids League and hereby give my approval to his/her participation in any and all sponsored activities. I assume all risks associated with participation in the sport, including, but not limited to, falls, contact with other participants, the effects of weather and traffic and all other reasonable risks associated with the sport. All such risks to my child are known, understood, and assumed by me. I understand this informed contract, and agree to all of its conditions, on behalf of my child.

Parent/Guardian #1 Signature Date Parent/Guardian #2 Signature Date Further, I authorize the HSA-SA Soccer Kids League to provide emergency medical treatment of any injury or illnesses of my child if such treatment is considered necessary and is performed by a qualified provider. Family Physician: _______ Phone: ______

Pre-existing medical condition (e.g., allergies, or chronic illness:_

Parent/Guardian #1 SignatureDateParent/Guardian #2 SignatureIMPORTANT: A T-SHIRT WILL BE PROVIDED. PLEASE MARK SHIRT SIZE.CIRCLE SHIRT SIZE: YSMYMYLYXLASAMAL

HSA-SA Important Information

Games are played on Saturdays.

Refund Policy – Once Registration is returned and played NO REFUNDS will be given. HSA-SA will be unable to guarantee special requests or team preferences other than for siblings in the same age bracket.

We are a volunteer organization. Participation, is greatly needed and

sincerely appreciated. Coaches are welcome!

Due to field concerns, as well as consideration to all spectators, only

players and coaches are permitted on the field at any time.

Please be supportive of all players and referees. Unsportsmanlike behavior by players, coaches, or fans is unacceptable, and anyone exhibiting such behavior may be asked to leave the premises. Remember you are representing Harmony Science Academy-SA.

All Registrations must be given TO FRONT OFFICE. No verbal or e-mailed

registration requests will be accepted. No forms accepted without full payment. No late registrations will be accepted. There will be no exceptions to these rules. 1st 15 players to sign up will be placed on a team. Teams are as follows K1st grade team, 2nd3rd grade team, 4th5th grade team. If teams need to be separated we will do so.

The Kids' League

The Kids' League is a program offers sports as soccer and basketball for the children with all interests to participate in. The Kid's League will provide these opportunities for children in grades K-5.

Purpose: is to develop youth leagues with special rules to ensure a maximum of Fun, Fairness, Self-esteem building, Success and a Positive experience in which Positive behavior and Positive values can be realized for every player and the parent are Positive Fans "For the Kids"

How will the League start off?

Well will have different grade groups from K-5 grade. Teams will be co-ed and games will be played on the Saturdays. Each team will play each other once within their grade levels. Kinder vs. Kinder, 1st graders vs. 1st graders, etc. All registered players will be placed on a team.

How many games per week?

All league teams will always have a Saturday morning or afternoon game each week (8am/10am/12 noon/etc.) Each team will be allowed to practice one day a week. Season Starts October thru November . It's a 6 weeks season and all games are played at CASA (Christian Academy of San Antonio) or New Life School Christian School.

Volunteer/Volunteer Coaches Every volunteer will need to complete an application and have a background check. We will need 2 coaches per team. If interested in coaching please contact Coach Ybarra. We will be having a meeting with all coaches. Meeting TBA

Registration Fee: \$45 dollars. That includes the cost of T-Shirt and Registration. **Admission:** \$1: Students- 4 years and up; Adults: \$2

<u>Players need to bring their own ball and water bottles. Students will need to purchase Black shorts for game days.</u>

Ball size: K1st- 4 2nd 3rd- 5 4th and 5th regular ball size