



YOUTH SOCCER

Player/Parent Commitment Contract Super Y

Application is hereby made for registration of the player named below as a member of the Orlando City Youth Soccer (OCYS) for the 2015 Super-Y soccer season. The Parent/Guardian (I/we) understand that this commitment is for this entire period. I/We understand that the selection and team placement of players shall be at the sole and absolute discretion of the OCYS coaching staff. The continued participation of a player is contingent upon the player and family abiding by the rules, agreements, and policies (including Parent and Player guidelines and responsibilities) of OCYS and/or all other sanctioning bodies that issues a player pass.

Players Name: _____ Date of Birth: _____
Age Level: U _____ Circle: Male/Female
Parent/Guardian Name 1: _____ Cell Phone: _____
Parent/Guardian Name 2: _____ Cell Phone: _____
Parent/Guardian email: _____
Home Address: _____
City: _____ State: _____ Zip code: _____

PAYMENT SCHEDULE & FINANCIAL OBLIGATION

Please make Payments directly to OCYS. Checks should be made payable to Orlando City Youth Soccer and mailed to: OCYS, 1900 Seminole Soccer Loop, Sanford FL 32771. Statements will not be mailed.

Super-Y Fee (non-refundable) \$285.00

Parent signature _____