



ST. CHARLES SOCCER LEAGUE  
**2013-2014 Recreation Soccer**

*U4–U10 Registration Application Form*

P.O. Box 518 • Boutte, LA 70039 • [www.stcharlessoccer.org](http://www.stcharlessoccer.org)

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Thank you for your interest in the **St. Charles Soccer League (SCSL)** Recreation Program.

**Soccer in St. Charles Parish** is operated by volunteers under the umbrella of the St. Charles Parish Recreation Department. Please visit our website for a complete handbook for the recreational teams. The SCSL Recreation program is broken down by ages and are as follows:

- **U4 Junior Recreation** for children age 3. Currently we offer this in the Fall but with enough participation can expand to Spring.
- **U5-U6 Junior Recreation** for children ages 4 & 5 respectively. We offer a Fall & Spring League. If you decide to play both within the same year, we are offering a discount.
- **U8-U10 Recreation** for children ages 6-9. Fall & Spring League offered separately. If you decide to play both within the same year, we are offering a discount.

The age of the player is determined by their age on JULY 31 of the summer prior to the start of the upcoming soccer year. A soccer year is the same as that of a school year in that it starts in the Fall and runs through to the Spring of the following calendar year.

**MINI KICKER PROGRAM:** Age 3 (U4)

**JUNIOR RECREATION:** Ages 3-5 (U4, U5, & U6) Teams in the league can play in either the Fall (August-November) or the Spring (January –April) or can play both. Games are played once a week on Saturdays. Teams are formed based upon the player's age and the side of the river they live on. Junior Recreational teams are co-ed teams. Uniform fees are separate however will be used for a two year period.

**RECREATION:** Ages 6-9 (U8 & U10) Teams in this league can play in either the Fall (August-November) or the Spring (January – April) or can play both. Teams normally play one game per week on Saturday but may play two games when necessary. Games will be played against teams from other clubs (Houma, Lafourche & Thibodaux) and travel to play these clubs is expected. In general, 50% of the games will be played at a St. Charles Soccer site. At the end of the Fall Season, an in-house U10 tournament will be held. Teams are formed based upon player's age and the side of the river they live on. These teams are gender specific with a 50% play rule. Uniform fees are separate however will be used for a two year period.

**COACHES:** Coaches are volunteers and needed for these leagues. Teams can only be formed if we have the appropriate number of coaches. Coaches will also be provided necessary training and materials in order to successfully train the kids. If you are interested, please complete the coaching application. You will be contacted by the appropriate Director once registration is closed.

**LSA COACHING REQUIREMENTS:** Volunteers interested in coaching are required to complete an online registration form directly with Louisiana Soccer Association (LSA) and will be subject to a criminal background check. Application is posted on the LSA website ([www.lsa-soccer.org](http://www.lsa-soccer.org)), under Risk Management menu. A link to this page is also posted on our website. St. Charles Soccer League requires all U10 coaches to have a minimum "E" license to coach.



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**DIRECTOR OR COACHING (DOC):** In the upcoming soccer year, 2013-2014, SCSL will introduce a new position, Director of Coaching (DOC). The DOC will be on hand year round for coaching clinics for all ages, training clinics throughout the year, and much more. It is the goal of SCSL to train and educate both players and coaches of SCSL.

**SOCCER CAMPS:** Please check our website at [www.stcharlessoccer.org](http://www.stcharlessoccer.org) for more information or contact Kathy Salles at [katsoccer66@yahoo.com](mailto:katsoccer66@yahoo.com).

**VOLUNTEERS:** SCSL is an organization run by volunteers. The board members consist of members who have been around for many years and some are new to the organization to bring a fresh outlook and foresight. Being a volunteer can range from helping coaches, to volunteering services for fields, to attending monthly meetings and finally to coaching. In order to make this organization be the best it can be for players and families, we encourage you help out in any way you can. If it weren't for the help of our volunteers we couldn't make this organization what it is today.

**BOARD MEETINGS:** Board meetings for SCSL are conducted monthly and are usually the second Monday of each month. We encourage all parents to attend these meetings. Your input as parents can really help the board in not only growth and development of the program but help us meet the needs of the families who participate in our program. See our website ([www.stcharlessoccer.org](http://www.stcharlessoccer.org)) for more information on board meetings place and times.

**DIRECTORS:** Please see our website for the Directors for each age group.

**REGISTRATION:** There are two ways to register your child for the upcoming soccer year. You can download, print and mail your registration to: St. Charles Soccer League (SCSL), P.O. Box 518, Boutte, LA 70039 or visit one of our onsite registrations on the following dates:

- **May 18, 2013** at JB Martin Middle School in Paradis, LA – 9 a.m.–12 p.m.
- **June 8, 2013** at Harry Hurst Middle School in Destrehan, LA – 9 a.m.–12 p.m.

If you choose to mail your registration to our P.O. Box, please make sure you complete the registration form in its entirety, the medical consent form, copy of birth certificate (first time players), coaching application (if applicable) and payment. LSA requires all players submit a copy of their birth certificate. This applies to all first time players. **WE CANNOT PROCESS APPLICATIONS UNLESS ALL DOCUMENTS AND PAYMENTS ARE RECEIVED.** If any document is not completed, we will not be able to process and you could potentially lose a place on a team.

**MULTIPLE PLAYER DISCOUNTS:** Multiple player discounts are available for 3 or more children (siblings) in the program. Please contact your director for more information.

**REFUNDS:** Full refunds will be given if we are unable to place your child on a team **ONLY!** Partial refunds will be given only in the event of illness or if the player is moving out of the St. Charles area. If you have a specific unforeseen circumstance and wish to get a refund, please contact your director. The board will review each request to determine if a refund should be granted. Please keep in mind that at the time of registration, a fee of \$15 per player is paid to LSA to register them with the state. This money cannot be refunded.



ST. CHARLES SOCCER LEAGUE  
**2013-2014 Recreation Soccer**  
*U4-U10 Registration Application Form*

**Registration deadline is June 30, 2013.**

(Any registrations received after deadline does not guarantee placement.)

Payment must accompany completed application to be processed. Please print legibly.

**PLAYER INFORMATION**

First Name:	Middle Name:	Last Name:	DOB / /	Gender <input type="radio"/> M <input type="radio"/> F
Address:	City:	Zip:	Main Phone #	
Age as of 7/31/2013:	# of Years Played:	Prior Year League:	Prior Year Team	
Parent/Guardian #1 Name:		Phone Number:	Cell Number:	
Parent/Guardian #2 Name:		Phone Number:	Cell Number:	
Email #1:		Email #2:		
Person to Contact in case of emergency:		Phone Number:	Relation to Player:	
Special Request/Instructions (not guaranteed):				

**Yes!** I would like to **Volunteer / Coach / Assist**

**REGISTRATION FEES**

<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">U4 Fall Season .....</td> <td style="width: 10%;">\$40</td> <td style="width: 10%; text-align: right;">_____</td> </tr> <tr> <td>U5-U10 Fall Season .....</td> <td>\$60</td> <td style="text-align: right;">_____</td> </tr> <tr> <td>U5-U10 Spring Season .....</td> <td>\$60</td> <td style="text-align: right;">_____</td> </tr> <tr> <td>U5-U10 Fall &amp; Spring Season .....</td> <td>\$110</td> <td style="text-align: right;">_____</td> </tr> <tr> <td>Uniform (U8-U10 only) .....</td> <td>\$35</td> <td style="text-align: right;">_____</td> </tr> <tr> <td>Field/League Improvement Donation</td> <td></td> <td style="text-align: right;">_____</td> </tr> <tr> <td><b>TOTAL PAYMENT .....</b></td> <td><b>\$</b></td> <td style="text-align: right;"><b>_____</b></td> </tr> </table>	U4 Fall Season .....	\$40	_____	U5-U10 Fall Season .....	\$60	_____	U5-U10 Spring Season .....	\$60	_____	U5-U10 Fall & Spring Season .....	\$110	_____	Uniform (U8-U10 only) .....	\$35	_____	Field/League Improvement Donation		_____	<b>TOTAL PAYMENT .....</b>	<b>\$</b>	<b>_____</b>	<p><b>2013 UNIFORM POLICY</b>          Uniforms are an additional cost for all U8-U10 players and are mandatory. The U-10 age group uniforms will be used for 2 years.</p> <hr/> <p><b>Make Payment to:</b>          St. Charles Soccer League (SCSL)</p> <p><b>Mail to:</b> St. Charles Soccer League          P.O. Box 518, Boutte, LA 70039</p>
U4 Fall Season .....	\$40	_____																				
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<p><b><u>LEAGUE USE</u></b></p> <p>_____</p> <p style="text-align: center;">Age Group</p> <p>New / Returning</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Registration Fee</td> <td style="width: 10%;">\$</td> <td style="width: 10%;">_____</td> </tr> <tr> <td>Uniform</td> <td>\$</td> <td style="text-align: right;">_____</td> </tr> <tr> <td>Donation</td> <td>\$</td> <td style="text-align: right;">_____</td> </tr> <tr> <td>Late Fee</td> <td>\$</td> <td style="text-align: right;">_____</td> </tr> <tr> <td><b>Total</b></td> <td><b>\$</b></td> <td style="text-align: right;"><b>_____</b></td> </tr> </table>	Registration Fee	\$	_____	Uniform	\$	_____	Donation	\$	_____	Late Fee	\$	_____	<b>Total</b>	<b>\$</b>	<b>_____</b>	<p>Check # _____ Cash _____</p> <p>Date: _____</p> <p>Received by: _____</p>
Registration Fee	\$	_____															
Uniform	\$	_____															
Donation	\$	_____															
Late Fee	\$	_____															
<b>Total</b>	<b>\$</b>	<b>_____</b>															



ST. CHARLES SOCCER LEAGUE  
**2013-2014 Recreation Soccer**  
*Medical Consent and Liability Form*

P.O. Box 518 • Boutte, LA 70039 • www.stcharlessoccer.org

Form must be filled out completely and signed to participate. *Please print.*

**Medical Consent**

Player's name: \_\_\_\_\_

Parent/Guardian #1: \_\_\_\_\_

Parent/Guardian #2 (if applicable): \_\_\_\_\_

As a Parent or Legal Guardian, I (we) assume full responsibility for all injuries sustained by my child while participating in this organized sport. I (we) further agree to hold harmless all St. Charles Soccer Board Members, Coaches, Referees, and Parents for any and all injuries. As guardian or parent of the above named player, I hereby give my consent for medical care prescribed by a duly licensed Doctor of Medicine, Doctor of Dentistry, or EMT. This care may be given under whatever conditions are necessary to preserve the life, limb, or well-being of my dependent.

Parent or Legal Guardian Signature and Date of Signature \_\_\_\_\_ Date \_\_\_\_\_

**St. Charles Parish Liability Waiver**

A new requirement from St. Charles Parish

To Whom It May Concern: I/We grant permission for my/our son/daughter to participate in the sports program of your Booster Club and the St. Charles Parish Parks and Recreation Department. He/She is in good health and has no physical defects that strenuous physical exercise would affect. (Note: A notice from a physician should accompany this form if there is any limitation.) I/We agree to release the (ST. CHARLES SOCCER LEAGUE) and the St. Charles Parish Council, St. Charles Parish Parks and Recreation Department, the Director, Coaches, and Sponsors for any injuries, disabilities, death, loss or damage to person or property including accidents which he/she may incur while participating in practice sessions, games, or while traveling to and from any games and activities, whether arising from the negligence of the releases or otherwise, to the fullest extent permitted by law.

I/We do further agree to return all uniforms and equipment issued to my/our son/daughter upon request of his/her sponsor or coach. I/We understand that no one in our family will be able to participate in any St. Charles Parish Parks and Recreation Department Sports Program until the equipment is returned or paid for in full.

I/We also certify that the information concerning my/our son/daughters birthdate is correct. I/We understand that any false information may result in my/our son/daughter being suspended from participating in the St. Charles Parish Parks and Recreation Program for a period of not less than two years.

**NOTE: Each child is required to have a copy of his/her birth certificate on file with the Recreation Department. At least one parent or guardian signature is required.**

Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Parent or Legal Guardian Signature and Date of Signature \_\_\_\_\_ Date \_\_\_\_\_



ST. CHARLES SOCCER LEAGUE

# 2013-2014 Soccer

## U4-U18 Uniform Order Form

**Registration deadline is June 30, 2013.**

(Any registrations received after deadline does not guarantee placement.)

Payment must accompany completed application to be processed. Please print legibly.

### PLAYER INFORMATION

First Name:	Middle Name:	Last Name:	DOB / /	Gender <input type="radio"/> M <input type="radio"/> F
Address:	City:	Zip:	Main Phone #	
Parent Name:		Phone Number:	Cell Number:	
Email:		Age Group:		

### RECREATION

#### 2013 RECREATION UNIFORMS (U-8 – U-10)

Ordered as a kit and will consist of a jersey, short and pair of socks.

SIZES:  
circle one

YXS,    YS,    YM,    YL,    Adult S

Recreation Uniform (U8-U10).....\$35 \_\_\_\_\_

**TOTAL PAYMENT.....\$ \_\_\_\_\_**

### COMPETITIVE

#### 2013 COMPETITIVE UNIFORMS (U-11 – U-18)

Ordered as a kit and will consist of a 2 jerseys, 1 short and 2 pair of socks.

SIZES:  
circle one

**MEN'S**    YM,    YL,    S,    M,    L,    XL,    XXL

**WOMEN'S**    YM,    YL,    S,    M,    L,    XL,    XXL

Competitive Uniform (U11-U18).....\$78 \_\_\_\_\_

**TOTAL PAYMENT.....\$ \_\_\_\_\_**

<b>LEAGUE USE</b>  _____ Age Group New / Returning	Rec Uniform    \$ _____	Check # _____    Cash _____
	Comp Uniform    \$ _____	Date: _____
	<b>Total</b> \$ _____	Received by: _____