

2010-2011 Brockport Blizzard Soccer Club ~ Tryout and Registration Instructions

Registration for the Brockport Blizzard Soccer Club is open to boys and girls ages 8-19.

Tryouts will be held **July 30, 31 and August 1, 2010**. You are encouraged to pre-register for these tryouts by sending the required information to the club registrar. The registration fee is **\$25**.

Registration Forms are available from the registrar or by choosing the “handouts” link at www.brockportsoccer.org.

You will need to complete and/or provide 5 items:

1. Registration Form
2. Code of Conduct Form
3. Medical Release Form
4. Copy of Birth Certificate (required only if you did not play for the Blizzards last season)
5. Registration Fee: a non-refundable **registration fee** must accompany the registration paperwork.

Registrations received **prior to July 30th** ~ **registration fee \$25**.

Walk-in registrations on the day of tryouts ~ **registration fee \$35**.

After a roster is complete the registration fee balance will be due by September 15th.

There will be no refunds if a player leaves a team after the roster is determined.

Mail forms and tryout fee to:

Michelle Wilcox, Registrar
Brockport Soccer Club
P.O. Box 121
Brockport NY 14420

Or forms may be dropped off at:

221 Hollybrook Rd
Brockport, NY
Attn: Michelle Wilcox, Registrar

2010-2011 Membership Fees for all age groups ~ Due by September 15th (This is separate from the registration fee)

By cash or check

\$245

By credit card

\$254 (go to www.paypal.com and send your payment to blizzard.registrar@gmail.com)

2011 Season Age Matrix

1. Find the month the player was born in the top row.
2. Move down the column until you reach the year the player was born.
3. Trace that row to the left. The entry will contain the player's Age Group.
4. If grade doesn't match you may move up to the player's grade (in Sept 2010)

Grade	Age Group	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul
2	U08	2002	2002	2002	2002	2002	2003	2003	2003	2003	2003	2003	2003
3	U09	2001	2001	2001	2001	2001	2002	2002	2002	2002	2002	2002	2002
4	U10	2000	2000	2000	2000	2000	2001	2001	2001	2001	2001	2001	2001
5	U11	1999	1999	1999	1999	1999	2000	2000	2000	2000	2000	2000	2000
6	U12	1998	1998	1998	1998	1998	1999	1999	1999	1999	1999	1999	1999
7	U13	1997	1997	1997	1997	1997	1998	1998	1998	1998	1998	1998	1998
8	U14	1996	1996	1996	1996	1996	1997	1997	1997	1997	1997	1997	1997
9	U15	1995	1995	1995	1995	1995	1996	1996	1996	1996	1996	1996	1996
10	U16	1994	1994	1994	1994	1994	1995	1995	1995	1995	1995	1995	1995
11	U17	1993	1993	1993	1993	1993	1994	1994	1994	1994	1994	1994	1994
12	U18	1992	1992	1992	1992	1992	1993	1993	1993	1993	1993	1993	1993
graduated	U19	1991	1991	1991	1991	1991	1992	1992	1992	1992	1992	1992	1992

If a player's month and year of birth is not found in the age matrix then the player is not eligible to be on an RDYSL team.

Grade Appropriate Policy ~ Starting with the U09 age group, a player may play soccer in the club with his/her grade appropriate peers. This policy was developed and adopted so players can play with the same teammates in the club and at school.

Exceptional Player Policy ~ Players in grades 7 and higher may tryout for an older age level but must tryout with their age/grade appropriate peers first. Please read the “Exceptional Player Policy” posted on the web page if your child is interested in trying out for an older team. www.brockportsoccer.org

Registration Form ~ Brockport Soccer Club 2010-2011

1. Player Name and Birthdate	2. Address and Phone # of Player	3. School	
Exactly as it appears on birth certificate: Last Name: First Name: Middle Initial: Birthdate:	Street: City: State: Zip: Home Phone #:	Name of School District:	
		4. Grade Level	5. Gender:
		Sept 2010:	<input type="checkbox"/> Male <input type="checkbox"/> Female

6. Team Eligible for:	Starting with the U09 age group, a player may play soccer in the club with his/her grade appropriate peers. See instructions page for the age matrix. <input type="checkbox"/> Age Appropriate Policy <input type="checkbox"/> Grade Level Appropriate Policy
7. Team Requested	<input type="checkbox"/> Exceptional Player Policy: Players in grades 7 and higher may request to tryout for an older age group but must register prior to the tryouts of their age or grade appropriate team. Club coaches, the boy's director, the girl's director and the executive board determine the makeup of each team.

8. Parents/Guardian	Father	Mother
Name:		
Parent's Email:		
Home Phone:		

9. Statement of Participation and Liability / Medical Release:
 I give permission for my child to participate in the programs of the Brockport Soccer Club. I will not hold the Brockport Soccer Club, its directors, officers, coaches, principals, and sponsors responsible in any form for injury of my child while participating in this program.

Parents/Guardian Signature: _____

10. Each family will be expected to **Volunteer** up to **15 Hours** per player toward approved club activities (ie., **Brockport's Tournament**). If you do not wish to perform up to 15 hours of volunteer service per player, \$150 will be added to your child's fee.

Choose one:

I do not wish to perform up to 15 hours of volunteer service per player and will add \$150 to my child's fee. (Due with registration fee.)

I will volunteer up to **15 hours** per player toward approved club activities.

Parents/Guardian Signature: _____

11. The **registration fees** cover a period of participation of one year from September 1st through August 31st. Once your child has been chosen for a team your registration fee balance will become due. See instructions page for soccer fee schedule.

12. There will be no refunds if a player leaves a team after the roster is determined.

IMPORTANT: Your registration **MUST** include ALL of the following:

Please check each box when complete:

- Registration Form –completed and **signed in two places**
- Code of Conduct Form – **three signatures required**
- Registration fee of \$25 (prior to the day of tryouts) payable to **Brockport Soccer Club**
- Medical Release Form: completed and signed

please complete check information

Check #	Amount	Date

Check one:

- My child played for the Blizzards during the 09-10 season (birth certificates are kept on file for one year)
- My child did not play for the Blizzards 09-10 season (**copy of player's birth certificate MUST be enclosed**)

Mail all forms and registration fee to: BSC, Attn: Michelle Wilcox ~ P.O. Box 121 ~ Brockport NY 14420

Code of Conduct ~ Brockport Blizzard Soccer Club 2010-2011

Player Name: _____

Team Age: _____

Date Signed: _____

Code of Conduct: The Brockport Soccer Club was established to promote the game of soccer and to provide an atmosphere in which the game can be learned and enjoyed. Codes of conduct have been developed to keep the program committed to the proper ideals of sportsmanship, ethical conduct, and fair play at all activities. Every player, coach, official, and parent must agree to this code in order to participate in our program.

Parents	<p>Parents can be a very positive influence on the game of soccer and are encouraged to attend as many contests as possible to support their children. Being a spectator of a youth soccer game does have some major responsibilities. Just as a parent can be positive and encouraging, so can he/she be a negative force. A child will normally respond to a greater extent to his/her parents than to coaches, officials, or other players. Parents who are disruptive and disrespectful to referees, other parents, players, or coaches are not positive influences and cannot be tolerated. Demonstrations of negative behavior at soccer games will result in the following actions:</p> <p><u>First offense:</u> suspension for a minimum 1-league game and the appropriate fines as noted on the annual schedule of fines at www.rdysl.com (<i>Rules and Regulations Link</i>).</p> <p><u>Second offense:</u> suspension for a minimum 6-league game and the appropriate fines as noted on the annual schedule of fines at www.rdysl.com (<i>Rules and Regulations Link</i>).</p>
Players	<p>Players are expected to conduct themselves in a gentlemanly or ladylike fashion at all times and at all levels of play while representing the Brockport Soccer Club. This includes league games, tournaments and any other Brockport Soccer Club sponsored event. Violence and/or repeated demonstrations of conduct that is in direct violation of the laws of the game thus resulting in an ejection from any contest will incur league fines and will be dealt with severely. This includes the combination of yellow card offenses. <u>Players and parents are responsible for any fines</u> owed to the league due to unacceptable behavior. See fine schedule at www.rdysl.com (<i>Rules and Regulations Link</i>).</p> <p><i>Any player ejected from a game will be responsible for payment of any league fines and also will be dealt with according to the following format:</i></p> <p>1st Ejection Automatic minimum 2 game suspension 2nd Ejection Automatic minimum 4 game suspension 3rd Ejection Minimum suspension for the remainder of the season, plus a hearing before the Board of Directors</p>

I have read and agree to abide with the principles of the Brockport Soccer Club Code of Conduct

X (Player Signature)	X (Father/Guardian Signature)	X (Mother/Guardian Signature)
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Medical Release ~ Brockport Blizzard Soccer Club 2010-2011

1. Player Name	2. Player Information	3. Insurance Information
Last Name:	Street:	Insurance Company:
First Name:	City:	ID#:
Middle Initial:	State:	Subscriber:
Date of Birth:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	

7. Parents/Guardian Info:	Father	Mother
Name:		
Day Time Phone:		
Evening Phone:		
Cell Phone:		

8. Emergency Information:	Doctor	Dentist
Emergency contact in parent's absence	Name:	Name:
Name:	City:	City:
Phone:	Phone:	Phone:
Cell Phone:		

Known Allergies:	
Medications:	
Medical Conditions:	
Additional Comments:	

9. Consent for Medical Treatment:

As the parent or legal guardian of the above-named player, I request that in my absence my child be admitted to any hospital or medical facility for diagnosis and treatment. I request and authorize physicians, dentists, and staff, duly licensed as Doctors of Medicine or Doctors of Dentistry or other licensed technicians or nurses, to perform any diagnostic procedures, treatment procedures, operative procedures and X-ray treatment of the above minor. I have not been given a guarantee as to the results of the examination or treatment.

10. Release of Liability:

Recognizing the possibility of injury associated with soccer and in consideration for the USSF/USYSA and its affiliates accepting the above-named player for its soccer program and activities, I hereby release, discharge and/or otherwise indemnify the USSF/USYSA, its affiliated organizations and sponsors, their employees, and personnel, including the owners of the fields and facilities utilized for the League/Tournament contents against any claim by or on behalf of the player as a result of the player's participation.

X	
Signature of Parent/Guardian	Date