

**Due By
February 11,
2012****

Farmington Soccer Club
Recreation Registration Form
Spring 2012

Office Use Only

Player Name: (Last) _____ (First) _____ **Phone:** (____) _____

Address _____ **City** _____ **Zip Code** _____

Birth date: (mo) _____ (day) _____ (yr) _____ **Soccer Age Group:** U- _____ **Gender:** (M or F) _____

To calculate your soccer Age Group: For Birth Months of Jan., Feb, Mar., Apr., May, Jun., July: Soccer year minus Birth year equals Age Group (example: 2012-1997= 15 or U15 Age Group. For Birth Months of Aug., Sept., Oct., Nov., Dec.: [Soccer year minus Birth year] minus one (1) equals Age Group (example: 2012 - 1997 = 15, 15 - 1 = 14 or U14 Age Group. Please use 2012 for Soccer year to calculate correct Age Group.

Please indicate the player's uniform size (we will attempt to honor your request):

YS ___ **YM** ___ **YL** ___ **YXL** ___ **AS** ___ **AM** ___ **AL** ___ **AXL** ___

Disclaimer of Liability: The undersigned hereby states that the player(s) to be registered are in good health and are covered by an existing health or accident insurance policy or are otherwise financially protected against injury. The Farmington Soccer Club (FSC), Western Suburban Soccer League, Great Lakes Soccer League, Michigan State Youth Soccer Association, Michigan State Premier Soccer Program, Farmer Jack and it's affiliate companies, the Farmington Public School System, the City of Farmington Hills, their officers, employees, agents, successors and assigns will not be held liable for any injury incurred in whatsoever manner and any claim against such entities or person is hereby waived. It is fully understood that the Farmington Soccer Club and all parties listed above have acted in reliance on this disclaimer in the acceptance of the registration of players and granting a license to use the soccer fields. The undersigned also certifies that the player will NOT be playing for any other organized soccer team during this season in compliance with WSSL bylaws. It is also agreed that the Farmington Soccer Club may use any pictures of the participants in any way they deem proper and suitable.

Parent's Signature: _____ **Date:** _____

(Required)

Requests: _____

Your request will be considered but cannot be guaranteed.

E-Mail Address: _____

Provided to FSC and coaches for communication purposes only.

FSC Recreation Registration Fees

New Player Registration Fee: \$100.00

Returning Player from Fall 2011: \$75.00

All checks mailed after Feb. 11th add late fee: \$15.00

** (Registrations postmarked after the due date will be placed in a pool and placed on teams based on availability.)

NSF Check Policy: A \$15.00 fee will be charged on all NSF checks.

Refund Policy: Full refunds shall be granted only if the request for player refund is made prior to the submission of FSC rosters to WSSL or MSYSA. A \$35.00 deduction shall be made for any Single Season Player Registration refund that is requested after the submission of FSC rosters. All refund requests shall be processed at the conclusion of each season. Questions: Call (248) 471-2019

Mailing Address

Please forward your completed registration form and payment to:

Farmington Soccer Club

P.O. Box 2191

Farmington Hills, MI 48333

Visit us at:

www.myfarmingtonsoccer.com

Email the registrar at:

lcharbarneau@yahoo.com

Please note any medical conditions your coach should be aware of: _____

Please complete: **Check Number** _____ **Amount** _____

Date Received _____