

ALL PLAYERS FROM  
3<sup>RD</sup> GRADE AND UP  
NEED TO PURCHASE A  
NEW JERSEY THIS  
SEASON. WE ARE  
SWITCHING TO A  
DIFFERENT STYLE.

ADULT SIZES: \$17.75

YOUTH SIZES: \$15.75



# Pleasant Township/Kouts Youth Soccer League 2010 Fall Registration Form



*From grades Pre K thru 8<sup>th</sup> ~ Child must be 4 years of age by July 1st*

Registration deadline is **July 9, 2010**. No late registrations accepted. Registration fee is **\$35** for first player and **\$20** for each additional sibling. **NO REFUNDS**. There will be a \$25 returned check fee. Mail checks or money orders with completed applications to Pleasant Township Soccer League ~ 404 Ross Ave Kouts, IN 46347.  
For questions please call 766-0018.

Player Last Name: \_\_\_\_\_ Male Female (Please Circle)  
 Player First Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 Parents/Guardians Name \_\_\_\_\_ Grade (For Fall 2010) \_\_\_\_\_  
 Street Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 City: \_\_\_\_\_ Alternate Telephone \_\_\_\_\_  
 State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Alternate Telephone \_\_\_\_\_  
 Health issues/Concerns: \_\_\_\_\_ Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Emergency Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Number of seasons played: \_\_\_\_\_ Email: \_\_\_\_\_  
**Registration fee is \$35 for first player and \$20 for each additional sibling ~ Registration Total \$\_\_\_\_\_**

## Jersey/Shirt Information

\*Shirts are included in the registration fee for Pre K thru 2<sup>nd</sup> Grade, please select size below\*

\*Jersey fees for 3<sup>rd</sup> thru 8<sup>th</sup> grade are listed below (read the following before selecting jerseys) \*

**\*Jerseys are to be worn for both Fall and Spring Seasons. During the spring season the players will be wearing pinnies which will be supplied by the league\* \*Pre K and Kindergarten teams do not travel\***

Important: Please circle uniform size

### Shirt Sizes

### Jersey Sizes

YS YM YL AS AM AL AXL

**Youth: \$15.75      Adult: \$17.75**  
 YS YM YL AS AM AL AXL

**Jersey/Shirts Total \$\_\_\_\_\_**

## Volunteers, Sponsorships, Donations

The Kouts Youth Soccer League depends on volunteer help, sponsorships and donations. In order to keep fees as low as possible please consider contributing in one of the following areas (Please circle choice):

Coach      Assistant Coach      Referee      General Volunteer      Contact Name: \_\_\_\_\_

**Sponsors:** League Sponsor      Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Donation: \$1.00      \$5.00      \$10.00      \$\_\_\_\_\_**

**\*For more information on sponsorships please contact Craig/Cindy Farmer at 219-766-2927      Donation Total \$\_\_\_\_\_**

**(Please add registration/jersey/donation totals) Total Amount \$\_\_\_\_\_**

**PLEASE TURN OVER. READ THE ENTIRE PAGE. SIGN AT THE BOTTOM.**

As the parent or spectator of a Kouts Youth Soccer League player, I understand and agree that I will be ejected from any Kouts Youth Soccer League venue where games are being held for any of the following reasons at the sole discretion of any board member or field monitor:

- Using foul or abusive language
- Using threatening actions or words
- Use of alcohol or drugs or displaying actions that indicate an individual may be under the influence drugs or alcohol
- Any unsportsmanlike conduct directed toward a referee, player, coach or club official

### **Consent for Medical Treatment**

I HEREBY GIVE MY PERMISSION FOR \_\_\_\_\_ TO PARTICIPATE IN THE PLEASANT TOWNSHIP/KOUTS YOUTH SOCCER LEAGUE AND RELEASE ALL COACHES, LEAGUE OFFICIALS, REFEREES AND PLAYERS FROM LIABILITY IN THE EVENT MY CHILD IS INJURED WHILE PRACTICING OR PARTICIPATING IN GAMES OR LEAGUE RELATED EVENTS.

As parent or legal guardian of \_\_\_\_\_ I, by signing below, give permission for emergency medical treatment of this child for illness/accident if I cannot first be contacted. In emergency, if the parent/guardian is unavailable, contact the emergency contact listed above. Furthermore, I agree to the registration fee and do endorse the Medical Treatment Release/Consent form.

**Signature of Parent/Guardian:** \_\_\_\_\_

### **Consent for Release**

I give consent for my child to be photographed, videotaped or filmed while participating in Pleasant Township/Kouts Youth Soccer League activities and for the resulting images to be used by Pleasant Township/Kouts Youth Soccer League for promotional purposes and on our website.

**Signature of Parent/Guardian:** \_\_\_\_\_