

SPRING 2008 RECREATIONAL PLAYER REGISTRATION FORM

Sunflower Soccer Association

P.O. Box 750194 • Topeka, Kansas 66675 • (785) 233-9700 • www.sunflowersoccer.org

(Fee information and registration deadlines available on reverse side of form.)

PLAYER LAST NAME: _____ **PLAYER** FIRST NAME: _____ SEX: M OR F (CIRCLE ONE)

ADDRESS: _____ BIRTH DATE: _____

CITY: _____ STATE: _____ ZIP CODE: _____ TELEPHONE: (785) _____

SCHOOL (NOT PRESCHOOL): _____ GRADE: _____ MOTHERS MONTH & DAY OF BIRTH: _____
(PLEASE LIST SCHOOL CHILD ATTENDS OR WILL ATTEND) (07-08) (KS YOUTH SOCCER NOW REQUIRES THIS FOR REGISTRATION PURPOSES)

FATHER'S NAME: _____ ADDRESS: _____
(COMPLETE ADDRESS, INCLUDING CITY, STATE & ZIP, IF DIFFERENT FROM CHILDS)

HOME PHONE: _____ PLACE OF EMPLOYMENT: _____ WORK PHONE: _____
(IF DIFFERENT FROM CHILDS)

CELL PHONE NUMBER: _____ E-MAIL ADDRESS: _____

MOTHER'S NAME: _____ ADDRESS: _____
(COMPLETE ADDRESS, INCLUDING CITY, STATE & ZIP, IF DIFFERENT FROM CHILDS)

HOME PHONE: _____ PLACE OF EMPLOYMENT: _____ WORK PHONE: _____
(IF DIFFERENT FROM CHILDS)

CELL PHONE NUMBER: _____ E-MAIL ADDRESS: _____

PLAYED PREVIOUSLY WITH SSA? YES NO LAST SEASON: _____ LAST COACH: _____
(ALL **NEW** PLAYERS **MUST** PROVIDE A COPY OF A STATE CERTIFIED BIRTH CERTIFICATE. HOSPITAL BIRTH ANNOUNCEMENTS ARE NOT ACCEPTED.)

PLEASE CHECK HERE IF YOU WOULD LIKE YOUR RECREATIONAL PLAYER ASSIGNED TO A DIFFERENT TEAM FOR THE SPRING 2008 SEASON.
PLAYERS MAY NOT REQUEST A SPECIFIC COACH.

UNIFORM SIZES (PLEASE CIRCLE) PLEASE NOTE: YOUTH MEDIUM IS THE SMALLEST SIZE AVAILABLE FOR THE MINI KICKERS.

| | YS | YM | YL | AS | AM | AL | AXL | |
|-------------|-----|-------|-------|---------|---------|---------|---------|------------------------|
| Shirt sizes | 6-8 | 10-12 | 14-16 | 36-38* | 38-40* | 40-42* | 44-46* | * INDICATES CHEST SIZE |
| Short size | 6-8 | 10-12 | 14-16 | 28-30** | 32-34** | 36-38** | 40-42** | **INDICATES WAIST SIZE |

PARENTAL SUPPORT (WE ASK FOR ACTIVE PARTICIPATION; PLEASE CHECK ONE OR MORE. INDICATE "M" FOR MOTHER OR "F" FOR FATHER.)

____ Coach ____ Asst. Coach ____ Field Workday ____ Board of Trustees ____ Soccer Tournament ____ Board Nominating Committee

PARENTAL/GUARDIAN CONSENT: I (we) the undersigned parent(s)/guardian(s) of the above-named player do agree and give my/our permission for his/her participation on a Sunflower Soccer team. I (we) hereby give consent for emergency medical care prescribed by a duly licensed doctor of medicine or doctor of dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent. I (we) understand that every effort will be taken to insure the safety of every child, but also acknowledge that there are certain inherent risks involved in playing soccer, and that some injuries may occur. I (we) acknowledge that Sunflower Soccer requires the use of shin-guards by all players. I (we), also agree to abide by the Sunflower Soccer "code of conduct" for coaches, parents and spectators. I (we) agree that the employees, officers, directors, and coaches of Sunflower Soccer shall not be held liable or responsible for accidents or injuries occurring during practice sessions, games or other soccer activities. I (we) understand that participation constitutes my/our approval for the use of photographs for publicity and promotion of Sunflower Soccer Association.

SIGNATURE OF PARENT/GUARDIAN: _____

FOR SSA OFFICE USE ONLY – DO NOT WRITE IN THIS AREA

DATE REC'D _____ REC'D BY _____ \$ _____ CHECK /CASH CHECK # _____

WE NOW ACCEPT MASTERCARD & VISA! IF YOU WOULD LIKE TO USE THIS SERVICE PLEASE PROVIDE THE FOLLOWING INFORMATION:

CARD NUMBER: _____ EXPIRATION DATE: _____ SIGNATURE: _____

IN COOPERATION WITH THE TOPEKA PARKS AND RECREATION DEPARTMENT
REGISTRATION FEE INFORMATION AND DEADLINES

ALL INCOMPLETE REGISTRATIONS WILL BE RETURNED FOR COMPLETION.

WE CANNOT GUARANTEE PLACEMENT FOR ALL THOSE WHO SUBMIT A REGISTRATION FORM.

Registrations received after the FINAL REGISTRATION DEADLINE will be placed in a pool and assigned on a first come/first served basis.

FINAL REGISTRATION DEADLINE IS JANUARY 10, 2008

MINI KICKER REGISTRATION

REGULAR REGISTRATION FOR PLAYERS AGE 4 OR 5 ON OR BEFORE JULY 31, 2007

\$40.00 REGISTRATION FEE DUE BY **JANUARY 10, 2008** (INCLUDES JERSEY ONLY*)

FULL UNIFORM OPTION IS NOT AVAILABLE FOR THIS AGE GROUP.

RECREATIONAL REGISTRATION

EARLY REGISTRATION - \$55.00

FOR PLAYERS AGE 6 – 13 ON OR BEFORE JULY 31, 2007

FORMS POSTMARKED OR RECEIVED BY **DECEMBER 6, 2007**.

(INCLUDES JERSEY, SHORT & SOCKS**).

REGULAR REGISTRATION - \$70.00

FOR PLAYERS AGE 6 – 13 ON OR BEFORE JULY 31, 2007

FORMS POSTMARKED OR RECEIVED BETWEEN DECEMBER 6, 2007 & **JANUARY 10, 2008**.

(INCLUDES JERSEY, SHORT & SOCKS**).

TO BE ELIGIBLE TO PLAY, YOUR CHILD MUST BE NO YOUNGER THAN FOUR YEARS OLD AND NO OLDER THAN 13 ON OR BEFORE JULY 31, 2007.

COMPLETE THE APPLICATION ON THE REVERSE SIDE AND BE SURE TO INCLUDE YOUR SIGNATURE. ALL **FIRST TIME** PLAYERS IN SUNFLOWER SOCCER ASSOCIATION **MUST ATTACH A PHOTOCOPY OF A CERTIFIED BIRTH CERTIFICATE FROM THE STATE WHERE THEY WERE BORN.** A HOSPITAL CERTIFICATE IS **NOT** ACCEPTABLE. MAIL THE REGISTRATION FORM, BIRTH CERTIFICATE, AND CHECK, MADE PAYABLE TO SUNFLOWER SOCCER ASSOCIATION, IN THE APPROPRIATE AMOUNT (SEE BELOW) TO P.O. BOX 750194, TOPEKA, KS 66675. A COACH WILL CONTACT YOU APPROXIMATELY TWO WEEKS BEFORE THE START OF THE SEASON. REGISTRATION FORMS WILL BE RETURNED IF THEY ARE NOT SIGNED AND ALL REQUIRED DOCUMENTS AND FEES ARE NOT INCLUDED.

NOTE: REGISTRATION FEE COVERS KSYSA REGISTRATION FEE, COST OF SUPPLEMENTAL INSURANCE COVERAGE, REFEREE FEES, FIELD MAINTENANCE AND DEVELOPMENT, JERSEYS FOR RECREATIONAL PLAYERS, AND GENERAL OPERATING EXPENSES.

REFUND POLICY: PAYMENTS WILL BE RETURNED TO ANY APPLICANT THAT CANNOT BE PLACED ON A TEAM BECAUSE THE DIVISIONS WERE FILLED. PAYMENTS, EXCEPT FOR A **\$15.00** ADMINISTRATIVE FEE, WILL BE RETURNED TO ANY PAID APPLICANT PLACED ON A TEAM THAT DOES NOT WISH TO PLAY DURING THE SEASON, **IF THE PARENT REQUESTS THE REIMBURSEMENT IN WRITING AND THE WRITTEN NOTIFICATION IS RECEIVED PRIOR TO THE FIRST SATURDAY OF SCHEDULED GAMES.** **NO REFUNDS WILL BE GIVEN AFTER THE SEASON STARTS.**

THE FALL SEASON BEGINS IN LATE AUGUST AND THE SPRING SEASON BEGINS IN EARLY MARCH. ALL PLAYERS ARE REQUIRED TO WEAR SHINGUARDS AND SOCKS THAT COVER THEM. WE DO OUR BEST TO PLACE KIDS ON TEAMS IN THEIR NEIGHBORHOOD OR FROM THEIR SCHOOL, BUT IT IS NOT ALWAYS POSSIBLE. PLAYERS MAY **NOT** REQUEST A COACH AND A COACH MAY **NOT** REQUEST THAT A PLAYER BE PLACED ON HIS/HER TEAM; YOU MAY REQUEST TO PLAY WITH A FRIEND. THE ONLY PLAYER GUARANTEED A SPOT ON A COACHES TEAM IS THE HEAD COACHES CHILD.

* A reversible uniform shirt is provided the first year a mini-kicker registers with our program. The uniform shirt is to be worn the entire time the player is a mini-kicker.

**Uniforms are provided once per soccer year for recreational players. A soccer year includes both the fall and spring season. The exception to this rule is if a player is assigned to a different team during the spring season.