



WESTFORD YOUTH SOCCER ASSOCIATION REGISTRATION INFORMATION – SPRING 2013



REGISTRATION POLICIES AND DEADLINES

- Registration Deadlines:** U10, U12, U14: **December 1, 2012**
 U16, U18: **December 15, 2012**
 In-Town (U6, U7, U8): **March 15, 2013**
- *Late Registrants are only placed on teams if there are available spots!*
 - *Registrations are not complete until payment has been received*
 - *Payments received after the registration deadlines will be assessed a \$20 late fee*
 - *Players with unpaid registration fees will not be placed on teams*
 - ***Mail-in Registrations must be postmarked two days before the registration deadline to avoid the \$20 late fee***
 - *Registrations after March 15th must be made on-line*
 - *Travel PLAYERS (U12 and older) and Travel COACHES (U10 and up) must submit a passport style photo.*

FEES

- Registration Fees are based on the number of players from the same family:*
- 1 player - \$80 (plus \$20 late fee if applicable)
 - 2 players - \$160 (plus \$40 late fee if applicable)
 - 3 or more players - \$210 (plus \$60 late fee if applicable)

HOW TO REGISTER

- On-line:** with Payment by Credit Card - www.westforyouthsoccer.com
By Mail: Mail completed registration form (reverse side) with a check payable to "WYSA" for the appropriate registration fees to the address below
- *Forms without the appropriate fees will be returned*
- First time players must submit a copy of their birth certificate to the address below*

PROGRAMS

	Age Group	Date Of Birth*
<i>Players with August birthdays may be eligible for two age groups.</i>	Travel	U18 Aug 1, 1994 – Jul 31, 1996 (Aug 1996 may play up in U18)
		U16 Aug 1, 1996 – Jul 31, 1998 (Aug 1998 may play up in U16)
		U14 Aug 1, 1998 - Jul 31, 2000 (Aug 2000 may play up in U14)
		U12 Aug 1, 2000 - Jul 31, 2002 (Aug 2002 may play up in U12)
		U10 Travel * Aug 1, 2002 – Jul 31, 2004 (Aug 2004 may play up in U10)
In-Town	U8 Aug 1, 2004 - Jul 31, 2005 (Aug 2005 may play up in U8)	
	U7 Aug 1, 2005 - Jul 31, 2006 (Aug 2006 may play up in U7)	
	U6 Aug 1, 2006 - Mar 31, 2008	

For more information see our web site or contact the appropriate Age Director

*** U10**

For the Spring season all U9 players (born between 8/1/03 and 7/31/04) and U10 players (born between 8/1/02 and 7/31/03) play Travel. There is no in-town U9/U10 program for the Spring season.

REFUNDS / CREDIT POLICY

Requests for Refunds/Credits MUST be received by March 1st, 2013.
 Requests received after March 1st will be granted only for the following situations: WYSA is unable to place a player on a team, unexpected medical conditions, or player relocation to another town. Refunds/Credits must be requested by following the instructions on the web site and are subject to a \$15 processing fee. Late fees are non-refundable. Refunds will be pro-rated if a multiple player discount was used. If an internal credit was used to pay the registration fees, the refund will be in the form of an internal credit only. **Players who drop because they make a school sports team, school play or other activities will not receive a refund unless it is requested by the deadline stated above.** See the WYSA website for the complete policy. If you notify WYSA that your player is dropping the player will be deleted from the roster. If the player was ineligible for a refund and later decides they want to play they will only be placed on a team if there is an available spot and are not eligible for a refund due to non-placement if there is no spot available.

ADDITIONAL INFORMATION: For more information visit our website: www.westforyouthsoccer.com



**WESTFORD YOUTH SOCCER ASSOCIATION
REGISTRATION – SPRING 2013**



Player's First Name:		Player's Middle Initial:		Player's Last Name:	
Street:			City:		State: Zip Code:
Home Phone:		Cell Phone:		Email Address:	
Age Group (Circle one): . <i>If the player is not eligible for the selected age group, the player will be placed in the appropriate age group.</i> See reverse side or website for more information <p align="center">In-Town: U6 U7 U8 Travel: U10 U12 U14 U16 U18</p>					
Gender (circle one): M F	Date of Birth: (MM/DD/YY) / /	Grade in <u>Spring 2013</u> :		School (or Westford school district if not attending Westford Public Schools):	
First Time Player? (circle one) Y N If yes, send copy of birth certificate with this registration.			IN-TOWN ONLY (U6, U7, U8): You may circle up to two nights that your player <u>cannot</u> practice. <i>No guarantees!</i> Mon Tue Wed Thu Fri		
Comments: <i>WYSA is unable to grant special requests including placement of players on teams with specific friends or coaches. WYSA will disregard any requests for specific coaches or teammates.</i>					

Emergency Contact Name:		Emergency Contact Phone Number:			
Doctor's Name:		Doctor's Phone Number:			
Does your player have any medical conditions we should be aware of? If none, please write "NONE."					

Massachusetts Youth Soccer Mailings: Check here if you do not want to receive any mailings from MA Youth Soccer: **No Mailings**

Photo ID: **All travel PLAYERS U12 and older AND travel COACHES (U10 and up) must submit a passport style color photo** with their registration. Registrations for players U12 and older or travel coaches will not be accepted without a photo. Please attach a passport style photo (head and shoulders) with your registration. Please – NO group pictures! The photo must clearly show the player's face.

Parent/Guardian1 – Name:		Address (Street, City, State, Zip) – <i>if different from player</i>			
Home Phone:	Work Phone:	Cell Phone:	E-Mail:		
PLEASE VOLUNTEER! I would like to volunteer as: (Circle all that apply) * Coaches must provide date of birth Concessions Coach* Asst Coach* DOB: _____ Preferred practice nights: _____					

Parent/Guardian 2 – Name:		Address (Street, City, State, Zip) - <i>if different from player</i>			
Home Phone:	Work Phone:	Cell Phone:	E-Mail:		
PLEASE VOLUNTEER! I would like to volunteer as: (Circle all that apply) * Coaches must provide date of birth Concessions Coach* Asst Coach* DOB: _____ Preferred practice nights: _____					

LIABILITY RELEASE: I, the parent/guardian of the above named registrant, a minor, agree that I and registrant will abide by the rules of WYSA, MYSA, the USYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the WYSA/MYSA/USYSA accepting the registrant for its soccer programs and activities (the "Program"), I herby release, discharge and/or otherwise indemnify WYSA/MYSA/USYSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Program(s) and/or being transported to or from the same, which transportation I herby authorize.

MEDICAL CONSENT: As parent or legal guardian of the above-named player, I herby give my 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 life, limb, or well-being of my dependent.

CREDIT/REFUND/REGISTRATION POLICIES: I have read and agree to the Credit/Refund/Registration policies on the Registration Information page and understand all refunds must be requested by March 1st.

Parent/Guardian Signature: _____
 Your signature indicates that you agree with all the statements above.