

## Meade County Youth Soccer Fall 2017 Registration

C/O T. Poole  
77 Ivy Court  
Brandenburg, KY 40108

<http://meadcountysoccer.com>

<https://www.facebook.com/MCYSA/>



### Recreational League Age Level

Under 4	Born in 2014 and 2015	\$56
Under 6	Born in 2012 and 2013	\$66
Under 8	Born in 2010 and 2011	\$66
Under 10	Born in 2008 and 2009	\$76
Under 12	Born in 2006 and 2007	\$76
Under 14	Born in 2004 and 2005	\$76
Under 16	Born in 2002 and 2003	\$76

#### PLAYER INFORMATION

Last Name	First Name	M.I.	Sex
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Home Address		
City	State	Zip
Phone	Birthdate (mm/dd/yy)	
Special Requests		

**UNIFORM SIZE:** Jersey: YXS YS YM YL AS AM AL AXL **Shorts:** YS YM YL AS AM AL AXL **Socks:** Youth Junior Adult

**First Year Player:** Y \_\_\_ \*N\_\_\_ \*If No, please complete the following: Preferred team choice: \_\_\_ Previous Team \_\_\_ Open Draw  
Team played Spring 2017 \_\_\_\_\_ Coach \_\_\_\_\_

#### PARENT / GUARDIAN INFORMATION

Father's Last Name	First Name	Address (if different)	Home Phone	Cell Phone	Email Address
Mother's Last Name	First Name	Address (if different)	Home Phone	Cell Phone	Email Address

Parental Support: MCYSA is managed and operated by volunteers. We ask for active participation from all parents. Please indicate the areas in which you can help.

\_\_\_ COACH \_\_\_ ASST. COACH \_\_\_ FIELD PREP. \_\_\_ BOARD MEMBER/AGE GROUP COMMISSIONER \_\_\_ CLUB REFEREE

The registrant and I will abide by the rules and Parent and Player Code of Conduct of Meade County Youth Soccer (MCYSA), its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for MCYSA accepting the registrant for its soccer programs and activities (the Programs) I hereby release, discharge and/or otherwise indemnify MCYSA, its affiliated organizations and sponsors, their employees, volunteers and associated personnel, including the owners (City of Brandenburg, Brandenburg Telephone Company, Meade County, First Federal Savings Bank) of the 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 Programs and, or being transported to or from the same, which transportation I do hereby authorize. Permission is hereby granted to use of the player's name and/or images for printed or other media to promote youth soccer in Meade County. I as PARENT/LEGAL GUARDIAN request that in my absence the above named player be admitted to any hospital or medical facility for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry or other such licensed technicians or nurses. Care may be given under any conditions necessary to preserve life, limb or well being of my dependent.

Emergency Contact (other than parent): \_\_\_\_\_  
Telephone: \_\_\_\_\_

Medical Conditions or other restrictions: \_\_\_\_\_

\*Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ALL FEES MUST BE PAID IN FULL AT REGISTRATION**

#### MCYSA Official Use Only

Received on \_\_\_\_\_ by \_\_\_\_\_ check# \_\_\_\_\_ or cash \_\_\_\_\_

Notes: \_\_\_\_\_

Early registration discount is \$5 and must be postmarked on or before August 5<sup>th</sup>. Register online at [www.meadcountysoccer.com](http://www.meadcountysoccer.com) or [mcsa.affinitysports.com](http://mcsa.affinitysports.com). Mail to address shown above.

Food court registration dates – 8/6—11am-1 pm; 8/13—11am-1pm; 8/16—6pm-8pm

Regular Registration ends August 13. Registrations received after this date will only be accepted at the coaches/boards discretion.