



# Alexander Soccer Spring 2018 Recreational League

## Registration and Parental Consent Form

Alexander Soccer Club Recreational League is open to boys and girls in preschool (4 years old before August 1, 2017) to 6<sup>th</sup> grade.

**Registration Deadline is February 25, 2018.** Coaches meeting and mandatory club parent meeting will be held March 5, 2018. The time and location will be posted to our website and Facebook pages, and communicated by email and text using info on registration forms. Practices will begin around March 25<sup>th</sup>. Games will begin around April 8<sup>th</sup>. Tentative days: PK practices Mondays @ 5:45pm; K-1 grades practices Tuesdays @ 5:45pm; 2-3 grades Thursday @ 5:45pm; 4-6 grades Monday @ 6:45pm and Thursday 6:45pm. All grades will have games scheduled on Sundays. Fees are \$30 for PK/K/1<sup>st</sup>/2<sup>nd</sup>/3<sup>rd</sup> and \$35 for 4<sup>th</sup>/5<sup>th</sup>/6<sup>th</sup>. Checks payable to Alexander Soccer Club. Mail forms and fees to: Alexander Soccer Club, PO BOX 333, Albany, Ohio 45710. Online registration (credit cards payments with a fee added) available <http://www.alexandersoccerclub.com/registration> In person registration will be available at the entrance of the Alex Middle School and High School gyms on February 11 3:00-4:30 and February 25 from 3:00-4:30 pm. PDF registration form available on our website. Questions: Email [info@alexandersoccerclub.com](mailto:info@alexandersoccerclub.com) or call 591-0185 or call/text 590-4212

**Child's Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Sex:** Male or Female

**Parent/Guardian (Print):** \_\_\_\_\_

**Mobile Phone Number:** \_\_\_\_\_ **yes / no I would like to receive Club text messages**

**Home Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

\*\* Email is very important as much of the soccer info and reminders from the club come by way of email messages. Please make [info@alexandersoccerclub.com](mailto:info@alexandersoccerclub.com) one of your contacts/friends so our messages do not get blocked or caught in spam. Also, please "like" Alexander Soccer Club on Facebook ("Alexander Soccer Club - Albany, Ohio").

**Shirt Size:** YXS YS YM YL AS AM AL AXL

**How many seasons has your child played recreational league soccer?** \_\_\_\_\_ Fall and Spring are separate seasons.

I hereby grant permission for my child to participate in the Alexander Soccer Club's Recreation Program. In granting permission, I voluntarily assume all risk of injury, accident, damage, and/ or loss to my child as a result of participation in the program. Therefore, I agree to release Alexander Local Schools and the Alexander Soccer Club, including its officers and any local individuals acting on behalf of the entire entity, from responsibility for any and all damage and injury of any kind as a result of my child's participation, except those from gross negligence.

Parent/Guardian Signature: \_\_\_\_\_

Medical Information: Should my child become injured during a soccer activity, I hereby give my consent to have Emergency Services and/or O'Bleness Hospital treat such injury. My child has the following medical problems, allergies, and/or medications:

\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Concussion Information: I have read the Ohio Department of Health Concussion Information sheet for youth sports. The sheet is available on our website at [www.alexandersoccerclub.com](http://www.alexandersoccerclub.com).

Parent/Guardian Signature: \_\_\_\_\_

Sudden Cardiac Arrest: I have read and watched the video about Sudden Cardiac Arrest information available on the our website [www.alexandersoccerclub.com](http://www.alexandersoccerclub.com).

Parent/Guardian Signature: \_\_\_\_\_

**Please note any siblings playing this season and their grade:** \_\_\_\_\_

**Coaching Information:**  I will coach.  I can help someone else coach.  Maybe

**Name and Phone Number:** \_\_\_\_\_ **Coach Shirt Size** \_\_\_\_\_