



## WESTFORD YOUTH SOCCER ASSOCIATION REGISTRATION INFORMATION – FALL 2012



### REGISTRATION POLICIES AND DEADLINES

- Registration Deadlines:**
- Travel (U10, U12, U14): June 30, 2012**
  - HS Age: August 15, 2012**
  - In-Town (U6, U7, U8, U9/10): August 15, 2012**
- *Late Registrants are NOT guaranteed placement!*
  - *Registrations are not complete until payment has been received*
  - *Payments received after the registration deadlines are subject to 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 August 15<sup>th</sup> must be made on-line*

### 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)

### Community Turf Fields

For information on the Community Turf Fields project or to make a donation please visit [www.westfordturf.com](http://www.westfordturf.com) or include an optional donation with your registration fees (\$10 suggested).

### HOW TO REGISTER

- On-line:** with Payment by Credit Card - [www.westforyouthsoccer.com](http://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

*Players with August birthdays **may** be eligible for two age groups.*

	<b>Age Group</b>	<b>Date Of Birth*</b>
<b>Travel</b>	<i>HS Age</i>	<i>9<sup>th</sup> – 12<sup>th</sup> grade (Fall 2012) or players born on or before 7/31/98</i>
	<i>U14</i>	<i>Aug 1, 1998 - Jul 31, 2000 (Aug 2000 may play up in U14)</i>
	<i>U12</i>	<i>Aug 1, 2000 - Jul 31, 2002 (Aug 2002 may play up in U12)</i>
	<i>U10 Travel*</i>	<i>Aug 1, 2002 – Jul 31, 2003 (Aug 2003 may play up in U10)</i>
<b>In-Town</b>	<i>U9/10 In-Town*</i>	<i>Aug 1, 2002 – Jul 31, 2004 (Aug 2004 may play up in U9/U10)</i>
	<i>U8</i>	<i>Aug 1, 2004 - Jul 31, 2005 (Aug 2005 may play up in U8)</i>
	<i>U7</i>	<i>Aug 1, 2005 - Jul 31, 2006 (Aug 2006 may play up in U7)</i>
	<i>U6</i>	<i>Aug 1, 2006 - Aug 31, 2007</i>

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

### \* U10 TRAVEL \* U9/U10 IN-TOWN

For the Fall season all U9 players (born between 8/1/03 and 7/31/04) play in the U9/U10 In-Town Program. U10 players (born between 8/1/02 and 7/31/03) have the option of playing In-Town or Travel

### REFUNDS / CREDIT POLICY

**Requests for Refunds/Credits MUST be received by August 1st, 2012.**

Requests received after August 1<sup>st</sup> 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](http://www.westforyouthsoccer.com)



**WESTFORD YOUTH SOCCER ASSOCIATION  
REGISTRATION – FALL 2012**



<b>Player's First Name:</b>		<b>Player's Middle Initial:</b>		<b>Player's Last Name:</b>	
<b>Street:</b>			<b>City:</b>		<b>State:</b>
<b>Home Phone:</b>		<b>Cell Phone:</b>		<b>Email Address:</b>	
<b>Age Group (Circle one):</b> . <i>If the player is not eligible for the selected age group, the player will be placed in the appropriate age group. See reverse side or website for more information</i> <p align="center"><b>In-Town:</b> U6 U7 U8 U9/U10                      <b>Travel:</b> U10 U12 U14 HS Age</p>					
<b>Gender (circle one):</b> M    F	<b>Date of Birth: (MM/DD/YY)</b> /    /	<b>Grade in <u>FALL 2012</u>:</b>		<b>School (or Westford school district if not attending Westford Public Schools):</b>	
<b>First Time Player? (circle one)</b> Y    N <b>If yes, send copy of birth certificate with this registration.</b>			<b>IN-TOWN ONLY ( U6, U7, U8, U9/U10 ): You may circle up to two nights that your player <u>cannot</u> practice. <i>No guarantees!</i></b> Mon    Tue    Wed    Thu    Fri		
<b>If you would like to donate to the Community Fields Project enter the amount of your optional donation: _____</b>					
<b>Comments:</b> <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>					

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

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

<b>Parent/Guardian1 – Name:</b>		<b>Address (Street, City, State, Zip) – if different from player</b>			
<b>Home Phone:</b>	<b>Work Phone:</b>	<b>Cell Phone:</b>	<b>E-Mail:</b>		
<b>I would like to volunteer as: (Circle all that apply)</b> * Coaches must provide date of birth, preferred practice nights and license Concessions   Events   Coach*   Asst Coach*   DOB: _____ Preferred practice nights: _____ License: G F E D					
<b>Parent/Guardian 2 – Name:</b>		<b>Address (Street, City, State, Zip) - if different from player</b>			
<b>Home Phone:</b>	<b>Work Phone:</b>	<b>Cell Phone:</b>	<b>E-Mail:</b>		
<b>I would like to volunteer as: (Circle all that apply)</b> * Coaches must provide date of birth, preferred practice nights and license Concessions   Events   Coach*   Asst Coach*   DOB: _____ Preferred practice nights: _____ License: G F E D					

**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 August 1<sup>st</sup>.

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

Your signature indicates that you agree with all the statements above.