



**KUTZTOWN SOCCER CLUB  
2012 SPRING REGISTRATION  
REGISTRATION DEADLINE:**

**November 4, 2011**

**PLEASE MAIL TO:  
KUTZTOWN SOCCER  
CLUB  
PO BOX 1  
KUTZTOWN, PA 19530  
www.kutztownsoccerclub.com**

**This form is ONLY for players who are at least 8 years old on 7/31/11!**

This registration is for boys (ages 8 through 18) and girls (ages 8 through 13). Players are placed on teams by age, gender and in accordance with the US Youth Soccer Association. Practices, which are up to the discretion of the coach, are generally twice a week. Games start in mid March and are played on either Saturday morning/afternoon or Sunday afternoon. (no games Easter weekend)

If there is more than one team in an age group, the Club will hold player evaluations to determine team placement. You will be notified if a tryout is required for your child's age group. Your child must attend at least one of the two evaluation sessions.

**All players will be required to have soccer club uniform. We are currently using a gray and a blue t-shirt style uniform. You may purchase the entire uniform or separates.**

Mail your completed form to the above address. Please include the registration forms, and a check or money order, payable to the Kutztown Soccer Club.

**ABSOLUTELY NO CASH WILL BE ACCEPTED.**

**GENERAL INFORMATION**

Name and address information should be completed on the EPYSA release form on page 3. Be sure to fill in the **player's** name and information on the release, not the parent's name and birth date etc.! Please leave the "Player I.D.#" section blank, it is for Club registrar use only. Please print all information neatly to avoid registration errors or fill out the form on your computer and then print.

For assistance with determining your child's team age division, please refer to the chart on the "Registration Page" of the web site. (U9, U10, U11, U12, U13, U14, U15, U16, U17) Older age groups may be combined to roster enough players.

**PLAYER'S SCHOOL GRADE ON 1/1/12 \_\_\_\_\_**

**VOLUNTEER COACHES** Please complete if you are willing to help coach one of our teams. You will be contacted by our coaching coordinator.

**VOLUNTEER NAME \_\_\_\_\_ HEAD COACH \_\_\_\_\_ ASST COACH \_\_\_\_\_**

**MEDICAL RELEASE STATEMENT**

*Please read and sign this statement. Your child cannot play or practice until this statement is signed.*

I, the parent/guardian of the registrant, a minor, or an adult of legal age, do hereby give permission to have any and all emergency medical attention and/or treatment which may be necessary to be administered to the registrant \_\_\_\_\_ in the event of an accident, injury, sickness, etc. which may occur while the registrant is under the supervision of the Coach, Assistant Coach, League Representative or Tournament Official. This release shall be in effect until August 1, 201G As parent/guardian, I assume responsibility for payment in full of any and all treatment provided.

Insurance Co. \_\_\_\_\_ Policy/ Group ID \_\_\_\_\_

**Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_**

# KSC APPAREL AND MERCHANDISE

Player Name \_\_\_\_\_ Phone # \_\_\_\_\_ Previous Coach \_\_\_\_\_

UNIFORM ITEMS			UNIFORM POLICY
DESCRIPTION	PRICES	SIZES	
Uniform T-Shirts 1 Blue, 1 Gray	\$15.00/set <small>you get both colors</small>	Full Uniform Pkg. \$30.00	All players are required to purchase a uniform if you don't already have one. Separates are available.
Uniform Shorts	\$11.00		
Socks	\$5.00		Youth or Adult

*Circle Uniform Size by hand after printing*

<b>Total uniform order amount due:</b> <i>Please transfer this amount into the section below.</i>	\$
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**Registration Fees: Returning Player- \$25.00    New Player to Club- \$37.00**

<p style="text-align: center;"><b>REGISTRATION FEE</b></p> <p style="text-align: center;"><small>Any registration postmarked after 1F/I /1F will not be accepted. NO EXCEPTIONS!</small></p>	<p>Make your check payable to: " Kutztown Soccer Club" and mail completed forms to: Kutztown Soccer Club PO Box 1 Kutztown, PA 19530</p> <p style="font-size: 0.8em;"><i>*DO NOT DELAY REGISTRATION BECAUSE OF PAYMENT ISSUES. We will gladly waive fees and/or work out a payment plan to help you out. Just contact Rich Reimert.</i></p>						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">REGISTRATION FEE</td> <td style="text-align: center;">\$</td> </tr> <tr> <td>PLUS: UNIFORM ORDER</td> <td style="text-align: center;">+ \$</td> </tr> <tr> <td><b>TOTAL DUE</b></td> <td style="text-align: center;"><b>= \$</b></td> </tr> </table>	REGISTRATION FEE	\$	PLUS: UNIFORM ORDER	+ \$	<b>TOTAL DUE</b>	<b>= \$</b>	
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PLUS: UNIFORM ORDER	+ \$						
<b>TOTAL DUE</b>	<b>= \$</b>						
<p><b>PLEASE WRITE YOUR CHECK # AND AMOUNT HERE —&gt;# _____ CHK AMT _____</b></p> <p style="text-align: center;"><i>No refunds after Reading Berks League registration is submitted.</i></p>							
<p style="text-align: center;"><b>For registration or apparel/uniform questions please contact Tom Fenerty at 484-226-6588</b></p>							

Parents,

**When you register your children you become a member of the Kutztown Soccer Club. As a member, you are entitled to help decide what happens in the club by attending the monthly club meetings held the third Wednesday of each month at the Kutztown Fire Company at 8pm. Everyone is welcome and encouraged to attend. The club is run by volunteers and we sure could use more involvement.**

Thank you,

**Kutztown Soccer Club  
Board of Directors**



EASTERN PENNSYLVANIA  
YOUTH SOCCER ASSOCIATION, INC.  
**PARTICIPANT REGISTRATION FORM**

**RG-6**

*Instructions for filling out this form: Print out a copy of this form. Fill it out completely and make sure it is signed by appropriate Parent(s)/Guardian(s). Mail completed form to the League Registrar.*

CHECK ONE:  TRAVEL  RECREATIONAL

CHECK ONE:

PLAYER  HEAD COACH  ASSISTANT COACH  ADMINISTRATOR  TEAM PARENT/MANAGER

LEAGUE \_\_\_\_\_ CLUB \_\_\_\_\_

TEAM AGE DIV. U- \_\_\_\_\_

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TOWNSHIP/BOROUGH \_\_\_\_\_ COUNTY \_\_\_\_\_

BIRTH DATE   -   -    MALE  FEMALE

HAS THIS PLAYER BEEN ROSTERED TO A TEAM IN ANOTHER USYS ORGANIZATION IN THE 201F-1G SOCCER YEAR?  YES  NO

IF YOU SELECTED YES TO THE PREVIOUS QUESTION, THE PLAYER IS CONSIDERED A TRANSFER. YOU MUST PROVIDE THE FOLLOWING INFORMATION ABOUT THE PLAYER'S ID ON THE PREVIOUS 201F-1G TEAM: STATE ASSOCIATION: \_\_\_\_\_

OUT-OF-STATE PLAYER ID \_\_\_\_\_ DOES THE PLAYER HAVE AN AUTHORIZED AND COMPLETED RELEASE

DOCUMENT FROM HIS/HER TEAM APPROVED BY THE PREVIOUS USYS STATE ASSOCIATION IN WHICH HE/SHE WAS ROSTERED?  YES  NO

PLEASE PRINT

PARENT(S) / GUARDIAN(S) NAME(S) \_\_\_\_\_

PLEASE PRINT

E-MAIL ADDRESS(ES) \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK OR CELL PHONE \_\_\_\_\_

**Release Statement**

**NOTE:** This Statement MUST be signed by Parent/Guardian for Minor Player; an Adult Player for him/herself; Coach for him/herself; and Administrator for him/herself.

I, the parent/guardian of the registrant, a minor, or adult registrant of legal age, agree that I and the registrant will abide by the rules of the EPYSA, and its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the EPYSA accepting the registrant for its soccer programs and activities ("the Programs"), I hereby release, discharge and/or otherwise indemnify the EPYSA, 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 registrant's participation in the Programs, and/or being transported to or from the same which transportation I hereby authorize.

PARENT/GUARDIAN OR ADULT SIGNATURE \_\_\_\_\_ DATE   -   -

**Eastern Pennsylvania Youth Soccer Association**  
TWO VILLAGE ROAD, #3 • HORSHAM, PA 19044 • 215.657.7727 • www.epysa.org  
AFFILIATED WITH UNITED STATES SOCCER FEDERATION (USSF) AND FEDERATION INTERNATIONALE DE FOOTBALL ASSOCIATION (FIFA)