

FDSA REGISTRATION, FALL 2010

Register Online at www.fdsoccer.org

Players registering by July 30th 2010 will be guaranteed placement on Fall team if coaches are available. . Players signing up after July 30th will only be guaranteed placement if parent volunteers to coach or enough coaches volunteer. We will use same jerseys as Fall 2009/ Spring 2010 No need to purchase new old one still fits.

PLAYER INFORMATION EACH PARTICIPANT MUST HAVE A SEPARATE FORM.

*Shirt Size \$15 YM YL AS AM AL Age Group/Team

Name _____ Sex ____ Grade__ School _____

Address _____ Birth DateDD/MM/YY _____

City _____ Phone _____



Father Name _____ Add Phone _____

Mother _____ BirthDay (DD/MM) _____ Add Phone _____

Email address (Parent): _____

Registration (4/5 year olds) Registration Fees \$20.00
(6 - 14 year olds) Registration Fees \$35.00
- Discounts - Additional Sibling (2nd,3rd 4th etc) - \$10.00
- Reversible Jersey +\$15.00

AMOUNT ENCLOSED \$ _____ Check # _____
Make Checks payable to FDSA

In order to participate one or more of the following must be checked per family: Provide name & phone number.

- Coach Team** - Coaching Instruction & Certification will be provided.
- Concessions** - Adults are needed to man concessions on some game days.
- Maintenance** Repairs or improvement on facilities or equipment. Also on game days some set up/cleanup is needed .
- Referee** - Experienced referees are needed. Requires knowledge of rules & willingness to progress to certification. Must be over 12 yrs old.
- In Kind Contributions** Monetary contributions in lieu of volunteering (\$20) will be added to the FDSA Foundation.. If you or your business/company possesses specialized skills which would enhance FDSA, the soccer complex, or it members specify: _____

Name & Phone _____

COACH/PARENT/PLAYER AGREEMENT

Parent/Coach:

- 1) I will respect the referee of the match
- 2) I will respect the coach/parents of my child's team
- 3) I will respect the players of the opposition team
- 4) I will support my child in all of the activities of their soccer team
- 5) I will use only appropriate positive language on the sideline
- 6) I will help all the parents on the sidelines to use their performance skills to create a healthy environment for playing soccer

Player:

- 1) I will respect the referee of the match
- 2) I will respect and listen to my coach
- 3) I will respect the players on the other team
- 4) I will use only appropriate language for the soccer game
- 5) I will help all of my teammates create a healthy soccer environment
- 6) I will do my best on the soccer field

Waiver of Liability and Disclaimer & Emergency Authorization

To induce the Fort Dodge Soccer Association (FDSA) to accept registration and permit participation in youth soccer by the named individual. I, the parent or guardian of said individual, hereby give my consent and agree to release, indemnity and hold harmless FDSA, its officials, coaches, and representatives from any claim. We the undersigned, parent or guardian of the participant, a minor, do hereby authorize the coaches, assistant coaches, or parents of team members acting in the capacity of activity supervisors/vehicle drivers, as Agents for the undersigned to consent to Medical, or Dental Examination, Treatment, etc.

In Case of emergency I/we hereby authorize treatment and/or care of registered player at ANY hospital. If there is an emergency and I/cannot be reached, please **contact:** (named below) who is hereby authorized to act in my/our behalf.

 Name of Emergency Contact

 Phone

Does this child have any medical condition or medication needs that the FDSA should be aware of? _____

If you wish a family doctor contacted in case of your absence or in case of emergency, please list name and phone number.

 Doctor's Name

 Phone

Register online at www.fdsoccer.org

Parent or Guardian Signature _____ Date _____

If you would consider being on the FDSA Board or other positions, please write name and below and email jruge@fdsoccer.org:

Ft Dodge Soccer Assn REGISTRATION Fall 2010

Tentative Game Schedule (11 Sep – 22 Oct 2010)
Games normally scheduled on consecutive Saturdays



PERFORMANCE PARTNERS:



Currently view video over Internet at iowasoccer.org (22 minutes).

Parent or Guardian Signature _____ Date _____

AGES: 4-14 yrs. old

Registration Dates
Mail before 30 July 2010

Mail to:

FDSA % Joe Ruge
822 North 23rd Street
Fort Dodge, Iowa 50501
Register online at www.fdsoccer.org

Parent/Player/Coaching behaviors are the key factors in continued participation of youth in sports today. Remember that this program is for the recreational players and teams, and setup of teams and league play is for the betterment of the whole program vs. individual teams or players. Teams are setup in an effort to balance abilities and experience different coaches. Players with advanced abilities should consider playing up in the next division.. Please indicate preferences for what division your child wants to play (if available). Sportsmanship is key for players, coaches and spectators. Failure to demonstrate appropriate behavior could result in suspension from current & future FDSA activities. Games are played at Harlan Rogers normally on Saturdays. **Main soccer parking is in Harlan Rogers lot (south of Soccer Complex) please reserve North lot parking for visitors, those with small children and those with mobility problems.**

DO NOT PARK ON ROAD OR UNAUTHORIZED PARKING AREAS.

NO PETS ARE ALLOWED IN SPORTS COMPLEX.

EQUIPMENT NEEDED:

[SHINGUARDS, SOCKS, AGE APPROPRIATE BALL.](#)

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Age Group

Iowa Youth Soccer Age Groups
Must be 4 years old before Aug 1 2010.
New FDSA Players need to show Birth Certificate

Under 5	U5	3v3	3	Birthdate	after 1 Aug 2005 before 1 Aug 2006
Under 6	U6	3v3	3	Birthdate	on/after 1 Aug 2004
Under 7	U7	4v4	3	Birthdate	on/after 1 Aug 2003
Under 8	U8	4v4	3	Birthdate	on/after 1 Aug 2002
Under 9*	U10	6v6	4	Birthdate	on/after 1 Aug 2001
Under10	U10	6v6	4	Birthdate	on/after 1 Aug 2000
Under11*	U12	8v8	4	Birthdate	on/after 1 Aug 1998
Under12	U12	8v8	4	Birthdate	on/after 1 Aug 1996
Under13	U14	11v11	5	Birthdate	on/after 1 Aug 1995
Under14	U14	11v11	5	Birthdate	on/after 1 Aug 1994

Questions Call: Lori Paxton 571-2986
or Joe Ruge 955-1506