



**CENTRAL CARROLL SOCCER CLUB
REGISTRATION FORM
FALL 2010**

*In cooperation with the Central Carroll Recreation Council
and Carroll County Department of Recreation and Parks*

www.CentralCarrollSoccerClub.org

For CCSC use only									
Date:	int.								
Boys	Girls								
9	10	11	12	13	14	16	19		
Assigned:									

_____ Male
Player's First Name **Last Name** **Age (current)** Female

_____ / _____ / _____ _____ _____
Date of Birth (mm/dd/yyyy) **Grade Entering in Fall 2010** **Experience (yrs)**

_____ _____ _____ _____
Mother's First Name **Mother's Last Name** **Father's First Name** **Father's Last Name**

_____ _____ _____ _____ _____
Street Address **City** **State** **Zip**

Code

(____) _____ - _____ (____) _____ - _____ _____
Home Phone **Cell/Work Phone** **E-mail Address**

The Central Carroll Soccer Club is entirely made up of volunteers. Please circle the area where you can help:

- | | | |
|-------------|-------------------|--------------|
| Coach | Field Maintenance | Team Manager |
| Fundraising | Media Relations | |

A description of the roles and responsibilities of these positions is available

SPECIAL HEALTH CONCERNS / MEDICAL WAIVER

Special Health Concerns:

Any activity involving motion or physical orientation and response involves a personal risk of injury, over-exertion and/or stress. The under-signed (signature on page two) acknowledges that the Recreation Council does not provide any registrant medical or hospitalization insurance whatsoever, and hereby waives any and all claims against the Recreation Council and the Department of Recreation and Parks or any other person affiliated with the Recreation Council Program for injuries sustained while watching or playing games, practicing, traveling to or from games, or participating in any leisure time activity. Understand that the participant is subject to the Recreation Council **Standards for Coaches and Spectators** (documented on following page).

**CARROLL COUNTY RECREATION AND PARKS
Youth Sports Standards for Coaches and Spectators**

As we attempt to promote the most positive experience for the youth of Carroll County, we are committed to the following standards. All coaches, assistant coaches, volunteers, and spectators will be held to these standards.

As parents and guardians of a player, you are responsible for yourself, as well as all guests and family members who attend the game. The team's coach will be held accountable for the behavior of their team's spectators and will be disciplined accordingly which could include, but not limited too, forfeiture of the game.

ALL COACHES AND SPECTATORS WILL:

1. Comply with the policies and procedures of the Carroll County Recreation and Parks & schools as communicated by recreation council volunteers or County staff.
2. Respect all participants, coaches, staff, officials, and volunteers at every practice or youth sports event and encourage all children to do the same.
3. Refrain from abusive or inappropriate language or gestures toward officials, volunteers, coaches, staff and participants. With the exception of a congratulatory handshake, never make inappropriate physical contact with participants, coaches, staff, officials, or volunteers.
4. Accept the decisions of the officials as being fair and performed to the best of their ability. Spectators shall never go onto the playing field while the game is in progress or immediately after the game. Spectators should never approach an official. Coaches should only speak to an official within the rules of the game. A coach should never approach an official before, during or after a game to dispute calls made. Concerns regarding officials should be e-mailed to the referee coordinator.
5. Refrain from giving the children instructions during the game – allow the coaches to guide them.
6. Help ensure the safety of the playing area by reporting any unsafe hazards, removing trash, refraining from the use of tobacco within 50 yards of playing field or program site and refraining from use of alcohol or other drugs at all events.
7. Encourage and compliment players when they show improvement, play with extra effort, or simply need kind words.
8. Abide by a doctor's decision in all matters of health, injuries and ability to play.
9. Remember that the game is for the kids - not the adults.

PARENT or GUARDIAN SIGNATURE

I have completed the registration forms and have read all of the above (Medical Waiver and the Standards for Coaches and Spectators) and give my permission for the above named child to participate in the Central Carroll Soccer Club Program.

Please Reprint Child's Name

Signature of Parent or Guardian