

☆ Keep this part of the paper, so you have all the season's information. ☆

# Huntington Youth Soccer for Grades 1-6, page 1

## Fall 2016 Registration Information

See Practice  
Schedule on  
Reverse



<http://hys.soccer> for current info



Fill out both  
sides of  
application.

The registration is \$48 per player, grades 1-6.

**Final sign-up date September 2** and a sign-up table will be at the Huntington Recreation Field on Saturday, August 20

**PLEASE NOTE:** No player will be allowed on the field until the financial arrangements have been complete.

Absolutely no preschoolers are allowed on the field. Kindergarten students can play only by prior arrangement and must have a parent coach on the field during all times. (Kindergarten parent coaches are responsible for the cost of their t-shirt and background check.)

**Scholarships:** Two scholarships in the amount of \$28 are available, so please inquire if you have need of this. Families will be responsible for the balance of the registration fee (\$20).

**MORE INFO:** Shin guards and a water bottle are required. Cleats recommended.

**Soccer Shoe Exchange:** Soccer Shoes are available (or drop off) at the Town Clerk's Office after August 1.

**Set up field**  
(all adults are welcome)  
**Friday, August 19, 6 pm.**

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### 2016 Soccer Registration Form

Name \_\_\_\_\_  
Birth Date \_\_\_\_\_  
Address \_\_\_\_\_  
Phone # \_\_\_\_\_ Cell # \_\_\_\_\_  
email \_\_\_\_\_  
Parents Name(s) \_\_\_\_\_

Grade \_\_\_\_\_ Age \_\_\_\_\_ (in Sept)  
Shirt Size (circle one): Youth Medium Y-Large  
Adult Small Adult Medium Adult Large

Adult Volunteer \_\_\_\_\_  
 coach  
 assist on the field  
 Grades 1/2    Grades 3/4    Grades 5/6

Shirt size: \_\_\_\_\_

Name \_\_\_\_\_  
Birth Date \_\_\_\_\_  
Address \_\_\_\_\_  
Phone # \_\_\_\_\_ Cell # \_\_\_\_\_  
email \_\_\_\_\_  
Parents Name(s) \_\_\_\_\_

Grade \_\_\_\_\_ Age \_\_\_\_\_ (in Sept)  
Shirt Size (circle one): Youth Medium Y-Large  
Adult Small Adult Medium Adult Large

Adult Volunteer \_\_\_\_\_  
 coach  
 assist on the field  
 Grades 1/2    Grades 3/4    Grades 5/6

Shirt size: \_\_\_\_\_

**I AM INTERESTED IN FINDING OUT MORE ABOUT PROGRAM VOLUNTEERING OPPORTUNITIES:**

- scheduling    last day celebration    field pick-up / prep for practices and games

**MORE T-SHIRTS:** If you would like to order extra t-shirts, please indicate the size. They are \$12.

Shirt Size (circle one): Youth Medium Y-Large  
Adult Small Adult Medium Adult Large Adult XL

Make checks payable to: **Huntington Youth Soccer.** Send to Heidi Racht, drop off at the Town Clerk's Office or leave in yellow non-mail box at foot of driveway of Pleasant Mount Farm in Huntington Center.

# Huntington Youth Soccer for Grades 1-6, page 2

## Fall 2016 General Practice Schedule Information

<http://hys.soccer> for current info, calendar changes and game/jam information.

- **Playing fields:** Grades 1-2: Brewster-Pierce School  
Grades 3 & 4 / 5 & 6: Huntington Recreation Field
- **After Saturday practices, bring your lunch and stay for a BBQ!**



**First Day: Saturday, August 20** (NO soccer on Saturday, September 3, Labor Day weekend)

**Soccer concludes on Saturday, October 15** with a game between parents and players and food !

Time: TBA

### Tuesdays

- 5:30-6:15 1/2 teams - BPMS
- 5:30-6:30 3/4 teams - Rec Field

### Saturdays

- 9:30-10:30 1/2 teams - BPMS
- 9:30-10:45 3/4 teams - Rec Field
- 11:00-12:30 5/6 teams - Rec Field

### Wednesdays

- 5:30-6:45 5/6 teams - Rec Field



## 2016 Huntington Youth Soccer Parent/Guardian Consent & Players Medical Release Form

Player's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

### Please initial and sign:

\_\_\_\_\_ I give my consent to my son/daughter participating in the Huntington Youth Soccer Program, a Town of Huntington Recreational Program, organization through the Vermont Youth Soccer Association.

\_\_\_\_\_ I hereby release, discharge, and otherwise indemnify the volunteers and the owner of fields and facilities utilized for the Program, against any claim by or on behalf of my player son/daughter as a result of my son's/daughter's participation in the Program and/or being transported to or from the Program.

\_\_\_\_\_ I hereby authorize the transportation of my son/daughter to or from the Program.

\_\_\_\_\_ My player son/daughter has received a physical examination by a licensed medical doctor and has been found physically capable of participating in the sport of soccer.

\_\_\_\_\_ My player son/daughter has allergies \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, please provide information here: \_\_\_\_\_

\_\_\_\_\_ I have provided written notice, which is submitted in conjunction with this release and attached hereto, setting forth any specific issue, condition, or ailment, in addition to what is specified above, that my child has or that may impact my child's participation in the Program.

\_\_\_\_\_ I give my consent to have an athletic trainer and/or licensed medical doctor or dentist provide my son/daughter with medical assistance and/or treatment and agree to be financially responsible for the reasonable cost of any such assistance and/or treatment.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date