

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

Huntington Youth Soccer for Grades 1–6, page 1

Fall 2017 Registration Information

See Practice
Schedule on
Reverse



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

Fill out both
sides of
application.

Registration fee per player: \$48.

Final sign-up date September 6 and a sign-up table will be at the Huntington Recreation Field on September 5 & 6

PLEASE NOTE: No player will be allowed on the field until the financial arrangements & medical Paperwork 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 (don't come into the office for shoes until AFTER July 31).

Set up field
(all adults are welcome)
Friday, August 25, 6 pm.

2017 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 2017 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: Tuesday, September 5 (Grades 1-4)
Wednesday, September 6 (Grades 5-6)

Soccer concludes on Saturday, October 28 with a game between parents and players and food!

Tuesdays

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

Wednesdays

5:30-6:45 5/6 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



2017 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