



2023 SOCCER REGISTRATION

CHILDREN BORN FROM 2006 THRU 2019 ELIGIBLE

LEAGUE DATES Mondays thru Fridays
MAY 22-JUNE 23, 2023

All youth soccer league games will be held at the soccer fields located in Caspian, Michigan

COST \$40
(1ST CHILD)

COST \$40
(2ND CHILD)

MAXIMUM \$80
(PER FAMILY)

AFTER DEADLINE
(\$10 LATE FEE PER PLAYER)

ATTENTION: Registration Deadline March 31, 2023. Practices start: week of May 1, 2023.

Player _____ BOY or GIRL (Circle One)
FIRST NAME MIDDLE INITIAL LAST NAME

Address _____ Zip Code _____ DOB _____ Current Grade _____

Mother's Name _____ Father's Name _____

(or) Legal Guardian Name _____ Email Address _____

Phone _____ Cell Phone _____

JERSEY SHIRT SIZE (Circle or Check One)

Youth Size: XSmall _____ Small _____ Medium _____ Large _____ XL _____ Adult Sizes: Small _____ Medium _____ Large _____ XL _____

PLAYER EXPERIENCE (Please CIRCLE or CHECK)

New Player _____ Experienced Player _____ Position Played _____ Name _____

Wants to play with BROTHER or SISTER

PARENTS PARTICIPATION (Please CIRCLE or CHECK positions for which you are willing to volunteer)

Head Coach/Asst. Coach _____ Team Parent _____ Field Maintenance _____ Referee _____ Board Member _____

Forms MUST be postmarked by Friday, March 31st

Send registration form to:

IRON COUNTY SOCCER CLUB

(care of) Dawn Pisoni

612 W. Adams St., Iron River, MI 49935



REGISTER ONLINE

by Friday, March 31st at:

ironcountysoccerclub.com

Consent for Emergency Medical Treatment :

I, the parent or guardian of _____, give permission for emergency medical treatment of my child for illness or accident if I cannot first be contacted.

Emergency phone: Parent or Guardian

Name _____ Phone _____

Emergency contact other than parent:

Name _____ Phone _____

Relationship _____ Does your child have any allergies or require any special medication?

No _____ Yes _____ Explain _____

Waiver (Please read, then sign and date):

I have read over the Code of Ethics & Behavior for Parents and agree to exemplify its principles. I agree that the Soccer Association for Youth (SAY), its members, coaches and officers shall not be liable for any injury or loss that my child or children may sustain while participating in activities of any kind, whether sponsored by or under the supervision of SAY. I agree to indemnify and hold harmless SAY, its members, coaches, officers and designates of any claim whatsoever.

Parent/Guardian Signature _____

Date _____

DO NOT WRITE BELOW THIS LINE - IRON COUNTY SOCCER CLUB ORGANIZATION USE ONLY

Fee Paid \$ _____ Cash _____ Check # _____ Rec'd By _____ Date _____

Birth Year/Grade _____ Division _____ Team Assigned _____ Coach _____