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Spring 2018 Season





Tri-County Youth Soccer Association

- ★ Registration fee through March 30th - \$50 1st player; \$30 each additional sibling.
- ★ Registrations may not be accepted after March 30th, depending on roster space - **RESERVE SPOT EARLY.**

League provides ball and jersey. Player to provide: shin guards (required), black shorts, black socks, cleats (optional, but recommended)

please submit a separate form for each child


Drop Registration at
Corbin Rec Center & Gover Floral
 or

mail to: P.O. Box 1809, Corbin 40702
Forms/Questions
www.corbinyouthsoccer.com
www.corbinsoccer.com
 Still need help? Contact a TCYSA board member at 606.258.8144 or 606.261.1461.

Player Information

Parent/Guardian Information

Player's Name _____ Mother's Name _____
 Home Address _____ Father's Name _____
 City, State, Zip Code _____ Telephone Number _____
 Alternate Tele # _____
 Amount paid \$ _____ Check # _____ Cash _____
Birthdate (MO/DAY/YR) _____
 (League will use chart below to determine age group)
 School Player Attends _____
 Number of seasons played _____
Gender (Circle): Male Female E-mail Address _____
Jersey Size (Circle): YS (6-8) YM (8-10) YL (10-12) AS (32-34) AM (34-36) AL (36-38) AXL (38-40)

Please Consider Coaching no experience necessary; league supplies equipment, training, background check and soccer coaching/practice manual	Indicate Area(s) Where You Are Willing To Help: <input type="checkbox"/> Team Coach <input type="checkbox"/> Assistant Coach <input type="checkbox"/> League Volunteer
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Due to league growth, the numbers of requests and in keeping to a recreational/developmental philosophy, team placement requests cannot be honored. TCYSA thoughtfully schedules all events to take place within a two hour period to accommodate carpooling, siblings at different age groups, etc.

>Season is tentatively scheduled to begin 2nd week of April and finish by end of May. >Games are normally played one weekday (Monday or Tuesday) evening at 5:30 or 6:30 & Saturday mornings at the Corbin Civic Center on Hwy 312. >Practice times are set by the respective coaches with at least one weekday evening being the league suggestion.	SEASONAL BIRTH YEARS - RECREATIONAL - Fall/Spring 2017/18. <table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th>AGE GROUP</th> <th>BIRTH RANGE</th> </tr> </thead> <tbody> <tr> <td>12 & Under (U12)</td> <td>Born in 2006 or 2007</td> </tr> <tr> <td>10 & Under (U10)</td> <td>Born in 2008 or 2009</td> </tr> <tr> <td>8 & Under (U8)</td> <td>Born in 2010 or 2011</td> </tr> <tr> <td>6 & Under (U6)</td> <td>Born in 2012 or 2013</td> </tr> </tbody> </table> Birth Cert. may be requested for verification.	AGE GROUP	BIRTH RANGE	12 & Under (U12)	Born in 2006 or 2007	10 & Under (U10)	Born in 2008 or 2009	8 & Under (U8)	Born in 2010 or 2011	6 & Under (U6)	Born in 2012 or 2013
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I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of US Youth Soccer, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the US Youth Soccer accepting the registrant for its soccer programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify US Youth Soccer, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize. Please advise league of any special medical, physical or other concerns related to your child's participation in the league. The league reserves discretion over all decisions regarding participation.

Name _____

Signature _____ Date _____