



**Spring 2010 Youth Soccer Registration Form**  
**Kingston Springs Parks and Recreation**  
**Office: (615) 952-9885 Fax: (615) 952-2397**  
**kingstonsprings.net parks@kingstonsprings-tn.gov**

Player's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Ph.: \_\_\_\_\_ Cell : \_\_\_\_\_ Birth Date: \_\_\_\_\_ Gender: \_\_\_\_\_

Grade in School: \_\_\_\_\_ Age: \_\_\_\_\_ Primary E-Mail: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Did you play in the fall?: \_\_\_\_\_ Last Season Coach: \_\_\_\_\_

Players may be assigned to the same coach they played for in the fall if possible. KSYS reserves the right to place players on a team on a space available basis.

**Jersey Size: YS / YM / YL / S / M / L / XL**

**Shorts Size: YS / YM / YL / S / M / L / XL**

**(Uniforms are ordered once per year in the fall and are worn for both the fall & spring seasons)**

**The Kingston Springs Youth Soccer League is an all-volunteer league that is dependent on parents volunteering to coach. Please indicate below if you would be willing to help coach your child's team. If the league is unable to obtain coaches you may be issued a refund.**

**Yes: \_\_\_\_\_ No: \_\_\_\_\_**

**Player Registration Fees – Spring 2010**

- \$65.00 – City Residents (must be received before 1/25/10)
- \$75.00 – Non-City Residents (must be received before 1/25/09)
- \$90.00 – Spring 2009 Late Registration (received between 1/26/10 – 2/1/10)

**\* No Applications will be accepted after 2/1/10**

**Registration:** **Onsite:** Kingston Springs City Hall – Monday – Friday from 8:00 –4:00  
**By Mail:** Kingston Springs Parks & Recreation, PO Box 256, Kingston Springs, TN 37082  
 (Must include registration form and check made payable to the Town of Kingston Springs)

**\*\*Cancellation Policy - A cancellation request must be made by letter, fax or e-mail. Refund requests must be received no later than 1/25/10 for a full refund. Requests received after 1/25/10 will receive a refund minus a \$30.00 cancellation fee. Requests received after 2/15/10 will not receive a refund.**

**Calendar**

**January 23<sup>rd</sup> - Onsite Registration Kingston Springs City Hall – 9:00 – 12:00**

**January 26<sup>th</sup> – February 1<sup>st</sup> – Late Registration**

**March 6<sup>th</sup> – First Game**

**March 20<sup>th</sup> & April 3<sup>rd</sup> – No Games**

**May 8<sup>th</sup> – Last Game Day**

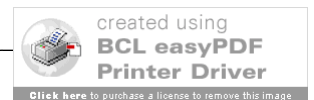
**April 25<sup>th</sup>, May 2<sup>nd</sup> & 15<sup>th</sup> – Rain Out Dates**

**Permission to Play / Hold Harmless**

I, the parent or guardian of the minor registrant, agree that the registrant and I will abide by all the rules of the Kingston Springs Parks and Recreation Department (KSPRD). Recognizing the possibility of physical injury associated with soccer and in consideration for the "League" accepting the registrant for its soccer programs and activities "Programs", I hereby release, discharge and/or otherwise indemnify the KSPRD, their employees and associated personnel and volunteers including the City of Kingston Springs 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 KSPRD sponsored activities which transportation I hereby authorize. I have read the cancellation policy and agree to its terms.

Signature \_\_\_\_\_

Date \_\_\_\_\_



***Office Use Only***	
Date Received: _____	Amount Received: _____
Cash: _____	Check: _____ Check Number: _____
Received By: _____	

# KINGSTON SPRING YOUTH SOCCER LEAGUE PARENT/ GUARDIAN CODE OF CONDUCT

As the Parent or Legal Guardian of a child involved with the Kingston Springs Youth Soccer League, I agree to abide by the following rules and guidelines below:

- I will promote the emotional and physical well being of the athletes ahead of any personal desire to win.
- I will remember that my child plays soccer for his/her enjoyment, not mine.
- I will always allow the coach to be the only coach.
- I will make every effort to get my child to scheduled practices.
- I will encourage good sportsmanship through my actions, by demonstrating positive support for all players.
- I will provide support for coaches and officials working with the athletes to provide a positive experience for all.
- I will demand my athlete treat all players, coaches, officials, parents, and spectators respect regardless of race, creed, color, sex or ability.
- I will treat all players, coaches, officials, parents, and spectators with dignity and in language, attitude, behavior, and mannerisms.
- I will inform the coach of any physical disability or ailments that may affect the safety my athlete or the safety of others.
- I will respect the property and equipment of KSYS.

I understand that by signing this document I am agreeing to support and promote this Parent/Legal Guardian Code or Conduct Agreement. Further, my failure to comply with this Agreement will result in disciplinary action, and could include expulsion form the Kingston Springs Youth League.

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Signature

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Date

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Printed Name