

Watertown Youth Soccer **Skills League** Spring 2006  
**In-Town Program** for Third and Fourth Graders

**Early Bird sign up - DEADLINE to SAVE is December 3<sup>rd</sup>**

**Mark your calender...1<sup>st</sup> session Saturday, April 29<sup>th</sup>!!**  
**Field location posted at [www.watertownyouthsoccer.org](http://www.watertownyouthsoccer.org) by April 1<sup>st</sup>**

**Questions?** See the back of this form OR check our website:

[www.watertownyouthsoccer.org](http://www.watertownyouthsoccer.org)

**Not sure if you have already registered your child for the Spring 2006 season?**

Contact: Maureen Mulligan (617-393-0035, [msm@riw.com](mailto:msm@riw.com))

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- **PLEASE PRINT CLEARLY!** Fill out BOTH SIDES of this form, sign the back and keep the top.
- Mail lower portion or deliver with payment to: **WYS – Skills League c/o Maureen Mulligan**  
**121 Marshall St., Watertown, MA 02472**

**Watertown Youth Soccer Skills League (3<sup>rd</sup> & 4<sup>th</sup> graders) Spring 2006 Registration**

**A. Player Information** - Player's Name: \_\_\_\_\_ Boy  Girl

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Fall 2005 Team (if child played, identify by coach or team name): \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

**B. Registration Fee – (CIRCLE ONE) – Make checks payable to Watertown Youth Soccer**

**\$65** (8 week Spring program RECEIVED BY Dec. 3<sup>rd</sup>)    **OR**    **\$75** (REC'D after Dec. 3<sup>rd</sup>)

**C. Volunteer – we need you!** Watertown Youth Soccer is a volunteer organization. Check your interest and we will contact you.

**If you can be a:**    Coach                       Assistant Coach                       Team Manager   
                                 Board Member                       Skills League Organizational Helper

Name of volunteer(s): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**(Fill out BOTH sides.)**

Watertown Youth Soccer – Skills League – Spring 2006 Information  
(In-Town Program for third and fourth graders)

- Check web site (www.watertownyouthsoccer.org) after 4/1/06 for field location.
- **Twice a week program:** Saturdays (2:00 to 4:00) **AND** Wednesdays (5:30 to 7:00) **April 29<sup>th</sup> through June 17<sup>th</sup>,**
- Each player should bring a size 4 soccer ball and full water bottle to each session.
- Players **MUST** wear shin guards, cleats are optional but recommended.
- **WYS will provide T-shirts as uniforms.** Black shorts & red socks are optional.
- Instruction by Play Soccer coaches, assisted by volunteer parent coaches.
- Team party on June 17<sup>th</sup> at the soccer field following the session.

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**Player's Medical Information:**

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

Medical Problems? \_\_\_\_\_

Person to notify in emergency \_\_\_\_\_ Phone \_\_\_\_\_

Doctor's name \_\_\_\_\_ Phone \_\_\_\_\_

Insurance carrier \_\_\_\_\_ Policy number \_\_\_\_\_

**Consent for medical treatment of a minor:** As parent or legal guardian of the above named player, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve life, limb, or well being of the registered player.

**Injury Waiver; Confirmation of Rules:** I hereby absolve the WYSL, including all coaches, managers, officers, and others participating in league activities from all liability and will not hold them responsible for injury incurred to the registered person, and hereby give my approval to this person's participation in this league. I also agree on behalf of my family and the player that we will follow and abide by the rules and procedures of WYSL. I acknowledge that WYSL and coaches have the authority to suspend registered players for poor behavior detrimental to the purpose of the league.

**USYS/MYSA/BAYS/WYSL Release:** I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of USYSA and its affiliated organizations and sponsors (including MYSA, BAYS and WYSL.) Recognizing the possibility of physical injury associated with soccer and in consideration for each of USYSA/MYSA/BAYS/WYSL accepting the registrant for its soccer programs and activities (the "Programs"), I hereby waive, release, discharge and/or otherwise hold harmless and indemnify each of USYSA/MYSA/BAYS/WYSL, 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.

**Parent/Guardian's Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Parent/Guardian's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Sign, return completed form, with payment...mail or hand deliver by **December 3<sup>rd</sup>!!**  
WYS-Skills League c/o Maureen Mulligan, 121 Marshall St., Watertown, MA 02472