

**2009 River Vale Youth Soccer
Association
Coed Recreation Indoor Soccer**



Grades (K – 8th) Kindergarten through Eighth are eligible to register.

For sign up, fill out both sides of this form and mail it or drop it off with registration fee, postmarked by November 16th, 2009 to:

**Mark Menzella
809 Marshall Rd. River Vale, 07675**

This year's indoor rec soccer will begin around Mid January and go until the end of March 2009. Each group will have about seven sessions. All registration by due date will be accepted. (This is not the first-come first-served registration.) Late registrants will be accepted if space is available.

Child's Last Name: _____ First Name: _____

Address: _____ Phone #: _____

E-mail: _____

Current Grade: _____ Boy: _____ Girl: _____

Birth date: M ___ D ___ Y ___ Parent's Name: _____

Fee: One child \$25, Two or more children per family \$45

Method of Payment: Cash _____ Check _____ Total Amount _____

Number of Children in Program: _____ Other Grades: _____

School(s) Attending: _____

I understand that adult involvement is IMPORTANT for a successful soccer program in River Vale. I volunteer for the following activities:

Head Coach: _____ Assistant Coach: _____

Parent's Signature: _____ Phone #: (____) ____ - _____

Should you have any questions, please contact:

Al Greco (201) 358-6760 agreco85@gmail.com

I, the parent and/or legal guardian of the above named registrant, a minor, do hereby give my permission for said registrant in any and all soccer related activities and both I on my behalf of the registrant, agree to abide by the rules of the River Vale Youth Soccer Association. I recognize that soccer is a physically demanding sport and I certify that the registrant is in good, sound physical condition, free from any illness, injury or disability, which would endanger his/her health or render it difficult or impractical for such child to participate in such activity. I recognize that soccer is a contact sport and there is a possibility of physical injury associated with soccer and in consideration for the aforementioned Association accepting the registrant in its program, I do hereby release, discharge, absolve, indemnify and agree to hold harmless the River Vale Youth Soccer Association, its organizers, sponsors, supervisors, officers, coaches, coaching staff and employees, associated personnel, including without limitation the owners of fields and/or facilities utilized for the program, participants, and persons transporting such registrant to, from or during such activities from any and all manner of claim arising out of injuries or otherwise to registrant whether as a result of negligence or other cause.

The undersigned as parent or legal guardian does hereby give his/her consent for emergency medical care prescribed by a duly licensed physician, dentist, or emergency medical technicians in the event such emergency medical care is required for the health, safety or welfare of the registrant due to illness or injury at a time when the parent or legal guardian is not available.

(SIGNATURE OF PARENT OR LEGAL GUARDIAN) (Date)

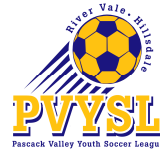
Emergency phone number: _____ - _____ - _____

Cell phone: _____ - _____ - _____

Special medical or other information:



River Vale Youth Soccer Association
“PARENTS CODE OF CONDUCT / ETHICS”
www.rivervalesoccer.com



I will do my best to have my child(ren) participate at all practices and games.

I will provide my child(ren) with proper attire, as recommended by the league.

I will support the coaches with their decisions in coaching my child(ren). If I disagree, I will be discrete in talking with the coach or the league director privately and apart from the children.

I will refrain from arguing, and bad mouthing an officials’ call or lack of call. I will respect the referees job or roll they play in the league.

I will not give instruction to my child(ren) or to any player on the field.

I will be careful of the tone of my voice and words I use around the young athletes.

The focus of the River Vale Youth Soccer Association (RVYSA), Hillsdale Soccer Association (HSA), and the Pascack Valley Youth Soccer League (PVYSL) is constructive fun, encouragement, skill development, increasing self-esteem, friendship and developing healthy workout habits for future years.

I understand that a major infraction of these above guidelines may result my removal for the balance of the current season and potentially future seasons.

New Jersey Law may require any parent or coach that acts inappropriately at a youth sporting event to be removed from the event and attend Anger Management Class before attending future sporting events.

New Jersey Law states that it is legal for Youth Organizations to have a “Code of Ethics” for athletes, volunteers, coaches and parents. Not following the “Code of Ethics” may bring the person before a review panel to determine the next step taken. Removal from the Youth Sports Program and Anger Management classes may be a direct result of the infraction.

I have read and agree to all of the above guidelines.

Signature _____

Date _____

Printed Name _____

Grade of Child(ren) _____

League Director’s Signature _____

Date _____