KEYSTONE YOUTH SOCCER CLUB

SIGN UP ON LINE www.keystoneyouthsoccer.com SIGN UP ON LINE

(Affiliated with Florida Youth Soccer Association and a member of North Florida Youth Soccer League)

2024 Spring Soccer Registration

TEAMS For Ages 4 through 18

IN HOUSE RECREATIONAL TEAMS (No Travel):

U6 Coed League ages 4 & 5 years old (Birth years 2018 & 2019) U8 Coed League ages 6 & 7 years old (Birth years 2016 & 2017) U10 Coed League ages 8 & 9 years old (Birth years 2014 & 2015) U12 Coed League ages 10 & 11 years old (Birth years 2012 & 2013) U14 Coed League ages 12 & 13 years old (Birth years 2010 & 2011)

High School Age Coed League (Birth years 2005 to 2009)

ALL GAMES & PRACTICES WILL BE AT TWIN LAKES PARK, 6065 TWIN LAKES ROAD.

SPRING SEASON: February 19, 2023 to May 18, 2023

FEE: \$80.00 Payable to **KYSC.** Supplied new uniform will be jersey, shorts & socks. You will need to purchase shin guards, soccer cleats & soccer ball

FEE: \$50.00 for all returning Players to their Fall 2023 Season Team

use your uniform from fall season 2023. Fee \$80.00 if you request to move new team with new uniform <u>To Register</u>: Come to or mail in to Trevor Waters Realty, Inc. at 7374 SR 21, Keystone Heights, FL

There is a mail slot on front door to drop forms.

You can Register & Pay on the website www.keystoneyouthsoccer.com

REQUIRED PARENT SIGNATURE BELOW If this is your first year playing you will need to supply a copy of **BIRTH CERTIFICATE.** **NOTE: LATE SIGN UP WILL BE ACCEPTED if space is available on teams

NOTE: Coaches, Team Sponsors, Field Workers, Referees Needed. KEYSTONE YOUTH SOCCER CLUB IS AN ALL VOLUNTEER NON PROFIT ORGANIZATION DEDICATED TO PROMOTING YOUTH SOCCER IN THE LAKE REGION AREA

Child's Name	Birth Date		Boy Girl	
Address	City	Zip	E-Mail	
Parents	Home#	Work#	Cell#	
If you want to return to y	REQUIRED) our Fall 2023 team please indica			
Circle Uniform Size		<u>Adult</u> S M	L XL	
Please Circle Coach	h Assistant Coach	Referee	TEAM SPONSOR (\$150)

INFORMED CONSENT I, as parent or guardian listed and signed above, agree that we will abide by the rules of **KYSC**, the state association **FYSA** and all its affiliated organizations. My/our child wishes to participate in soccer during the season of this registration. I acknowledge that I am completely aware of the inherent risks associated with soccer, and hereby waive, release, and discharge the state association **FYSA** and all of its affiliated organizations including **KYSC**, as well as their officers, directors, employees, and agents (collectively, the "Released Parties") from any and all liability and responsibility in the event that my child becomes injured in any way during participation in soccer events or activities associated with the Released Parties. includes full range of injuries from minor to severe, and the result could be death, paralysis, or other serious, permanent disability I further state that I take full responsibility for any injury that may occur as a result of my child's participation, and that I will not hold the Released Parties responsible for any aggravation of preexisting injuries prior to or during participation in any soccer events or activities associated with the Released Parties. **INSURANCE NOTICE:** All injuries must be reported within 90 days of the date of injury

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