

- 1) The person registering a team as coordinator MUST be 18 years old and responsible for full payment of team fees.
- 2) Shoreline Soccer Club will take individual payments from team members and apply those to any team. But, the team contact/coordinator is still responsible for full payment.
- 3) All team fees are due by the FIRST game.
- 4) An 18% APR will be applied to all unpaid balances and games may be forfeited.
- 5) Please register carefully. There are no refunds after a class, tournament, camp or league has begun. The \$200.00 team deposit is non refundable.
- 6) Shoreline Soccer Club will try to honor special requests submitted before scheduling occurs.
- 7) Schedules will be available at the first game for teams who have paid fees in full and who have submitted complete roster/waiver forms.
- 8) Shin guards are mandatory for any player under 18 years of age or any player in the high school or younger division and highly recommended for all players.
- 9) No one under 18 can play on an adult team.
- 10) A proof of age must be available upon request for all ages.
- 11) A \$50 rescheduling fee may apply after one reschedule per session.
- 12) A \$25 service charge for each returned check.
- 13) A \$10 service charge for any refund payment request due to overpayment of team fees.
- 14) A \$10 service charge for switching a player from a house team to a registered team.
- 15) Payment can be made by cash, check, Visa, Mastercard.
- 16) For further policies contact Shoreline Soccer Club or see the 2017/18 rulebook.

## 2017/2018 INDIVIDUAL REGISTRATION FORM

Name: \_\_\_\_\_ Sex: M F Birthdate: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Parent's Name (if under 18): \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Health Insurance: \_\_\_\_\_ Policy #: \_\_\_\_\_  
Division (circle one): Open Rec Rec +30 Rec +40 E-Mail: \_\_\_\_\_  
Instructional (circle one): Lil' Kickers Heart Academy Fun Zone Lacrosse Rental  
League (circle one) U8 U10 U12 U14 U16 High School Men Women Co-Ed  
Session Registering For: 1 2 3 Interested in Coaching: Yes No  
Has anyone in your household played at Shoreline Soccer Club before? Yes No  
Special Requests: \_\_\_\_\_  
Payment: Check Visa Mastercard Cash Amount Paid: \_\_\_\_\_  
Please Make Checks Payable to: Shoreline Soccer Club  
Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

**\*Waiver/Exclusion Clause\*** - I, the undersigned parent/guardian/participant of age, in enrolling at Shoreline Soccer Club, understand that in attending any Shoreline program and using the facilities does so at participant's own risk. Shoreline Soccer Club, its owner, employees and agents, shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant and family on the premises. Participants, parents and guardians assume full responsibility for all injuries and damages which may occur in or about any programs on the premises and does hereby fully and forever release, discharge and hold harmless Shoreline Soccer Club, and all associated facilities and its owners, employees and agents from any and all claims, demands, damages, rights of action, present or future resulting from or arising out of any person's participation in any programs or use of its facilities. In addition, participant agrees to follow the rules of play and conduct set by Shoreline Soccer Club. Participant, parent and guardian understand that failure to do so may result in suspension from participation.

**\*Consent\*** - I, the undersigned parent of/guardian of/legal age participant \_\_\_\_\_ do hereby grant authority to the staff of Shoreline Soccer Club to render a judgement concerning medical assistance or hospital care in the event of an accident or illness during my absence.

**\*Signed\*** \_\_\_\_\_ **Date:** \_\_\_\_\_