

Bay United Soccer Club Fee Agreement

Player: _____ Team: _____

Congratulations! Your child has been selected to join Bay United Soccer Club (BUSC) for the 2010 Spring Season. As part of a competitive travel soccer team your child will be making a commitment to training and competing to challenge themselves to playing great soccer throughout the Southeast region. As part of the registration process, we want to insure that you are fully aware and understand the expectations and financial obligations in accepting this position. Please carefully read the contract and sign and date below. This contract is between you, the parent or responsible party, and Bay United Soccer Club.

Registration/Admin. \$ 45 Due Feb. 1 for New players, this fee will hold the player's position on a BUSC Team.
All returning BUSC players from Fall 2009 have already paid these registration fees in full for the 2009-2010 season.

Jersey Fee: \$ 80 Due Feb. 1; the new BUSC jersey set must be purchased and paid in full in order to play.

Club Fees: \$200 Due Feb. 1 - Club Fees do not include team event fees that will be determined by the Team Coach and Manager.

Event Fees: _____ Due March 1 - This amount will be determined by each Team Coach and Team Manager depending on the teams' schedule

To Summarize total fee amounts due on February 1:
New Players will have a total fee of \$325 due on Feb. 1
Returning Players will have a total fee of \$280 due on Feb. 1

ALL FEES ARE NON REFUNDABLE

The club reserves the authority to deny player participation with the Club if the member is "Not in Good Standing".

Payments may be paid by one of the following methods: Please check which method you will be using to pay for your club fees.

_____ Check: Make payable to Bay United Soccer Club or BUSC

_____ Cash: See Treasurer for receipt

_____ Payment Schedule: See Treasurer

_____ Credit Card payments can be made online through PayPal by going to our website at www.bayunitedsoccer.org and going to our Fees page.

Bay United Soccer Club Fee Agreement

Player Information

Player: _____

Team: _____ DOB: _____ Boy or Girl

Parent: _____

Parent: _____

Responsible Party: _____

Mailing Address: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Alt. Phone: _____

Email Address: _____

Please indicate if you have other children playing on other teams with Bay United Soccer Club for this current season.

Player Team

Player Team

- Family members playing with Bay United Soccer Club this current season will receive the following discount :
 - \$ 50 for 2nd Child per season
 - \$100 for 3rd Child or more per season

Bay United Soccer Club Fee Agreement

Parent Financial Contract

As a parent I commit to the following:

1. As the responsible party, I agree to make all payments to fulfill our financial obligation before or by the due dates listed.
2. I understand that my commitment is for the entire Spring season and that I am obligated to pay all BUSC fees/costs for that entire season.
3. I understand that if my child quits or leaves the team for any reason other than season ending injury, that I remain obligated for all BUSC fees/costs for the entire season. The parent/player will not receive any refund for the remainder of the current season. Failure to pay fees/costs will result in my child being prohibited from future tryouts or team selection with BUSC or any FYSA affiliated team until all remaining balances are paid. If the member is delinquent on payments their players pass will be pulled and the player will be placed "Not in good standing", therefore not allowed to play any BUSC event until their account is brought to "In good standing" with the club. Any delinquent account is referred to a collection agency for resolution; an additional fee will be added to the balance owed to cover collection agency administrative fees.
4. I will share in any additional team expenses which include tournaments, coaches' expenses, etc. above and beyond the club fee, uniform fee and team events fee should they arise.
5. I agree to participate in Club and Team fundraising activities (including BUSC hosted tournaments). I understand that all funds collected will be credited to BUSC to be used for club operating expenses and scholarship fund. These funds remain with BUSC should the player decide to leave the club.
6. I understand that being a member of BUSC also makes me responsible for volunteering time to help support the club sponsored events, such as tournaments and fundraisers. We require 2 volunteer hours per family as needed per season at club sponsored events. If you are unable to volunteer at least 2 hours at BUSC events we ask you make a donation to the club of \$50 to help offset the cost of the event.

The Spring season runs from February to May. Any player who withdraws or drops from the team during the season is responsible for paying the balance of their season's dues including club fees, uniform fees and team event fees. You will also be responsible for paying the Florida Youth Soccer Association (FYSA) drop fee of \$25. All statements will be emailed to the responsible party.

Parent/Guardian (Print)

Date

Parent/Guardian (Signature)

Bay United Soccer Club Fee Agreement

Player Code of Conduct Contract

As a player with Bay United Soccer Club, I commit to the following:

1. Train and play to the best of my ability
2. Have a positive attitude and do whatever is asked of me on the soccer field, without complaining, for the good of the team.
3. Win without boasting and exemplify good sportsmanship.
4. Respect the officials and accept their decisions without question.
5. Encourage and never criticize my teammates.
6. Learn and obey the Laws of the game.
7. Respect my coach, teammates and my opponents.
8. Arrange my schedule so that I can participate in all practices, scrimmages, games, tournaments and team events on time. Failure to participate in practices or tournaments will place the player in jeopardy of losing playing time or being cut from the team. This is a commitment you make to your team to be present for any and all scheduled team practices and tournaments.
9. Notify my coach or manager with plenty of advanced notice if I will be late or unable to attend a practice or game. I acknowledge that the player, not the parent, is primarily responsible to notify the coach of any absence – prior to the absence.
10. Accept my coach's "no practice/no play" guidelines.
11. Attend practices and games properly dressed according to club and team standards.
12. Come to every game on time (usually 1 hour prior to game time), well rested, hydrated, and with a positive attitude.
13. Give my coach, trainers, etc...my full attention during training and at games.
14. I will abide by the rules, policies and procedures of the FYSA, BUSC club and team.
15. I understand that since this is a premier competitive environment, there is NO Guarantee of minimum playing time, position or placement on a team, but is dependent upon my efforts, commitment and skill.

EVERYTHING YOU DO IN PRACTICE OR A GAME AFFECTS NOT ONLY YOU, BUT THE WHOLE TEAM. WHETHER YOU PLAY A LOT OR A LITTLE, PLAY YOUR BEST. ALL PLAYERS ARE VERY IMPORTANT TO THE TEAM. WE WIN AND LOSE TOGETHER AS A TEAM.

If you are willing to make this commitment, then we believe that we can help you to become a better soccer player and a contributing member of a successful and competitive soccer program. As coach, I commit to you that I will also work hard to help improve your skills, to increase your knowledge of the game, and to make practices a worthwhile experience. I expect you to work hard and I will make every effort to make it fun also. Again, congratulations and welcome to BUSC!

BUSC Coach

BUSC Player

Bay United Soccer Club Fee Agreement

Date

Date

Parent Code of Conduct Contract

1. I will encourage good sportsmanship by demonstrating support for all players, coaches, game officials, and administrators at all times.
2. I acknowledge that I will abide by the Bay United Soccer Club and the FYSA Parent/Volunteer Code of Conduct.
3. **I will always allow the coach to be the only coach, and not coach from the sidelines.**
4. I will not be critical of the coach on or off the field.
5. BUSC has a 48 hour rule for our parents regarding games. Parents must wait 48 hours after a game before attempting to speak with the coach regarding any problem except, of course, in the case of an emergency. This is designed to allow cooler heads to prevail in any situation that may arise during the course of a game.
6. I will place the emotional and physical well being of all players ahead of my personal desire to win.
7. I will encourage good sportsmanship from fellow Bay United Soccer Club parents, coaches, officials and players at all times.
8. I will always remember that soccer is an opportunity to learn, have fun and remember that the game is for the players, not for the parents.
9. I will do the best I can each day to remember that all players have talents and weaknesses the same as my child does.
10. I will treat the coaches, other players and coaches, game officials, other administrators, and fans with respect at all times; regardless of race, sex, creed or abilities and I will expect to be treated accordingly,
11. I will support the coaches, officials, and administrators working with my child, I order to encourage a positive and enjoyable experience for all.
12. I will always be positive.
13. I will not enter the field of play or coaches bench for any reason unless asked by the coach or official.
14. I will not criticize game officials or take it upon my self to file complaints against game officials. If a complaint is warranted it shall be presented and made by the Club President.

Failure to comply may result in the suspension of your privilege to participate in FYSA sanctioned events or any event in which Bay United Soccer Club is being represented.

Parent/Guardian

Date

Bay United Soccer Club Uniform Order Form

Player Name: _____ Team: _____

Phone: _____ Email: _____

Uniform fee is due by February 1 and payment must be received before uniform items can be ordered. Please make checks to Bay United Soccer Club or BUSC.
 BUSC wear Adidas uniforms which are unisex, so both boys and girls uniforms will be the same. Each player's game day uniform will consist of 1 Royal Blue Jersey and 1 White Jersey, Royal Blue Shorts, Royal Blue Socks and BUSC Practice T-shirts.

If you would like to buy the Uniform package, please indicate by checking the box for Uniform Package.

Uniform Package – The Uniform Package (\$185) includes 1 Royal Blue Jersey, 1 White Jersey, 1 Short, 1 Sock, and 1 Training Suit with embroidered logo. (Name and Number on jacket is optional for an additional \$10)

Jersey Size (1 Royal Blue & 1 White Jersey) YS YM YL AS AM AL

Short Size: YS YM YL AS AM AL

Sock Size: YM YL Adult

Training Suite: Jacket Size: YS YM YL AS AM AL

Training Pant Size: YS YM YL AS AM AL

Optional Embroidery on Jacket (\$10): Name: _____ Number: _____

Uniform items - To order items separately please indicate quantity and size below.

_____ 1 Royal Blue & 1 White Jersey (\$80) YS YM YL AS AM AL
These jersey's will be purchased by the player and remain their property.

_____ Royal Blue Shorts (\$22) YS YM YL AS AM AL

_____ Royal Blue Socks (\$8) YM YL Adult

_____ Practice T-shirts (\$7) YS YM YL AS AM AL

_____ Optional Backpack(\$48) – Adidas Copa Sling w/ name _____
Name on bag

_____ Optional Adidas Training Suit (\$85) w/ embroidered logo

_____ Optional (\$10) – Name: _____ & Number: _____ on jacket

BAY UNITED SOCCER CLUB PLAYER PARTICIPATION AGREEMENT

Please provide the following information:

1. Date of last year/playing season that registrant participated in soccer:

2. Name of team registrant played with last: _____

3. Name of soccer club and state organization that player was last affiliated with:
Club - _____ and State Organization - _____

I, _____ the parent/guardian of the registrant, understand that the soccer season runs from August 1st through July 31st, and that my son or daughter will remain on this team for this seasonal year unless properly released or transferred. I also affirm that I have fully disclosed my child's former state and club soccer affiliations above. I also agree that neither I nor any member of my family will engage in poaching during the season.

Poaching is defined as the act of attempting to induce or the inducing of a registered and/or rostered player and/or coach to transfer or otherwise leave his/her current team/club prior to the end of the seasonal year (Aug 1 – July 31). It shall not be considered poaching to invite any player to try-out for a team to be formed for the next seasonal year so long as no contact is made until after the conclusion of State Cup Finals, or as may be set within a Region of FYSA, and prior to August 1st, unless that player is not currently registered/rostered to any FYSA team.

I, the parent/guardian of the registrant, agree that we will abide by the rules of this club, the state association (FYSA), and all of its affiliated organizations. My child wishes to participate in soccer during the season of this registration. I realize risks are involved in my child's participation. I understand that the risk to my child includes a full range of injuries from minor to severe, and the result could be death, paralysis, or other serious, permanent disability. I accept this risk as a condition of my child's participation.

PLAYER NAME

PARENT/GUARDIAN SIGNATURE DATE

Information Release Form

Bay United Soccer Club has a website that provides information about the club and its teams. The website also contains photographs of club members and players. Additionally, Bay United often issues press releases and team/player photographs to newspapers. It is important to be aware that photographs and/or images taken of your player during a soccer event have the potential to be viewed by internet users, as well as individuals that read the applicable publications. Whether or not you wish to have your photograph(s)/image(s) posted on the internet or in the newspaper is a matter of personal choice. Please read this form carefully, consider the options for release of information, and check the appropriate options based on your preference(s).

I, _____, give Bay United Soccer Club my permission to post the following type(s) of information about my son or daughter, _____, on the Internet and/or in the Newspapers. Bay United Soccer Club and its Board of Directors are not held liable for the release of information permitted by this agreement. This release form stays in effect until revoked by me in writing. If my child should leave or transfer from Bay United Soccer Club for any reason, this release form is no longer valid. I also agree to give the website manager a reasonable amount of time (not to exceed 30 days) to have my work and/or images removed from the webpages in which these items appear.

Please check the preferred option(s) for release of work and/or images to be posted on the Internet:

- _____ 1. Images only (no name will accompany any image containing your likeness)
- _____ 2. No limitations on images and names
- _____ 3. No images or names posted/released
- _____ 4. The following personal preference(s):

Player Signature _____ Date _____

Parental/guardian signature _____ Date _____

Team Managers will provide this completed form to the Club Web Master

MEDICAL RELEASE FORM

I, _____ (Parent/Guardian's Name) hereby give permission for any and all medical attention to be administered to my child _____ (Child's Name) In the event of accident, injury, sickness, etc., under the direction of the person(s) listed below, until such time as I may be contacted. I also assume the responsibility for the payment of any such treatment. This release is effective for the period of one year from the date given below.

ADDRESS: _____

HOME PHONE: _____

INSURANCE COMP: _____

POLICY NUMBER: _____

In case I cannot be reached, any of the following persons is designated to act on my behalf.

* COACH: _____

* ASST.COACH: _____

* MANAGER: _____

* A league representative where my child is playing.

* Any tournament representative where my child is participating in a tournament

PHYSICIAN: _____

ADDRESS: _____

PHONE: _____

KNOWN ALLERGIES: _____

SIGNATURE (PARENT/GUARDIAN) _____ DATE _____

Subscribed and sworn before me,

this _____ day of _____, 200__

Notary Public