

***Bay United Soccer Club***  
***Training Only Fee Agreement***

Congratulations! Your child has been selected to join Bay United Soccer Club (BUSC) for the 2010 Spring Season. Your child will be making a commitment to train 2 times a week from a licensed coach to improve their soccer skills. 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. 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 to train with BUSC. If you are a returning player you have already paid the Registration and Administration Fee in the Fall for the 2009-2010 season.

Club Fees:   \$200   Due Feb. 1 - Club Fees does not include team event fees.

**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 Pay Pal by going to our website at [www.bayunitedsoccer.org](http://www.bayunitedsoccer.org) and going to our Fees page.

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**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 list the email address(s) you would like to receive all invoices, statements and  
correspondence from BUSC.)

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 2<sup>nd</sup> Child per season
  - \$100 for 3<sup>rd</sup> Child or more per season

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**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 above.
2. I understand that my commitment is for the entire 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 35% fee will be added to the balance owed to cover collection agency administrative fees.
4. 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.
5. I understand that being a member of BUSC also makes me responsible for volunteering our time to help support the club sponsored events, such as tournaments and fundraisers. Failure to help support the club by volunteering 2 hours of our time as needed per season at club sponsored events will result in a \$20 fine or \$10 for each hour not worked.

The 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)

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**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, on time. This is a commitment you make to your team to be present for any and all scheduled team practices..
9. Notify my coach or manager with plenty of advanced notice if I will be late or can not 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. Attend practices properly dressed according to club and team standards.
11. Come to every practice on time well rested, hydrated, and with a positive attitude.
12. Give my coach, trainers, etc...my full attention during training.
13. I will abide by the rules, policies and procedures of the FYSA, BUSC club and team.
14. 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!

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BUSC Coach

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BUSC Player

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Date

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Date

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**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 abide by Bay United Soccer Club by-laws and policies.
4. **I will always allow the coach to be the only coach, and not coach from the sidelines.**
5. I will not be critical of the coach on or off the field.
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 I do.
10. I will treat my 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.

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Parent/Guardian

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Date

# 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 1<sup>st</sup> through July 31<sup>st</sup>, 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