

**FREEHOLD SOCCER LEAGUE (FSL)
2010 GIRLS ONLY SPRING RECREATION PROGRAM
PRE-K THROUGH 8TH GRADE**

Visit www.freeholdsoccer.com for additional information including contacts for recreation program.

- ELIGIBILITY:** Must be a Freehold Borough or Township resident during the season of play.
GIRLS ONLY - Pre-K (child must be entering kindergarten in September of 2010) and Kindergarten through 8th Grades (BOYS PLAY IN THE FALL SEASON)
- REQUIREMENTS:** Children must provide their own shin guards. Cleats are optional but must be soccer cleats
- REGISTRATION:** IN PERSON REGISTRATION @ MICHAEL J. TIGHE PARK, GEORGIA ROAD @ RECREATION CENTER
NO MAILED APPLICATIONS WILL BE ACCEPTED.
REQUESTS WILL NOT BE HONORED INCLUDING BUT NOT LIMITED TO PRACTICE DAYS, COACHES, CHILD'S PLACEMENT.
- REGISTRATION DATES:** **January 7, 2010, January 13, 2010, January 19, 2010, Jan. 28, 2010 ALL TIMES 6:30 p.m. – 9:00 P.M.**
- FEE:** \$70.00 PER CHILD. Checks or Money Orders should be made payable to Freehold Soccer League or FSL. No In Person Credit Card payments. There will be a \$25.00 fee for any check that is returned to FSL and your child will not be placed on a team until the registration fee and return check fee are paid to the league.
- LATE REGISTRATION:** Late registration will be conducted on line only. A late fee of \$25.00 per player will be charged for anyone registering after the last registration date. **There will be no exceptions to the late registration fee.**
- COACHING REQUIREMENTS:** All coaches, head coaches and assistant coaches are required by the Township of Freehold to have a background check performed which will require the person to be fingerprinted. Instructions for fingerprinting are available on the Freehold Soccer web site. This must be completed 30 days prior to the start of the season. Coaches are still required to be Rutgers Certified which is at the expense of FSL. Coaches must also complete a Volunteer Kid Safe Statement which can also be found under the forms section of www.freeholdsoccer.com.

ALL OF THE FOLLOWING MUST BE COMPLETED: (PLEASE PRINT)

CHILD'S NAME: _____ **DOB** _____

ADDRESS: _____ **PHONE:** _____ **ALTERNATE** _____

PARENT'S NAME: _____ **SCHOOL:** _____

CURRENT GRADE: (CIRCLE ONE) PRE-K KINDER 1ST 2ND 3RD 4TH 5TH 6TH 7TH 8TH

SHORTS SIZE ONLY: YS YM YL AS AM AL AXL

How many years has your child participated in soccer? _____

Does/has your child ever played travel soccer? _____ **Team name:** _____

Please list any medical conditions which the coach should be aware of. This will be kept confidential and provided only to your child's coach: _____

FSL is continually in need of volunteers to help with various jobs. Please volunteer for one of the following:

_____ **Coach** _____ **Assistant Coach** _____ **Referee** _____ **Grounds Keeper (setting up and lining fields)**

Please provide the name of the person who is volunteering so proper contact can be made: _____

If volunteering to coach/assistant coach do you have the following? ___ **Rutgers** ___ **F-License** ___ **Other**

Have you been fingerprinted with a Freehold Affiliated Sport: _____ **Yes** _____ **No** **If yes, show ID Card** _____

I have read and will abide by the Freehold Township Code of Conduct (http://www.top.freehold.nj.us/_forms_codeofconduct.pdf). All parties attending FSL programs with me will be advised to act in accordance with the Code of Conduct. (A COPY OF CODE OF CONDUCT WILL BE AVAILABLE AT REGISTRATION) _____ (Signature required for child's placement)

I certify my child is in excellent health and may participate in strenuous physical activity. I agree to hold harmless FSL, its servants, agents and/or volunteers from any and all injuries which my child may sustain during participation in the FSL program. I certify that I have read the above requirements. I give permission to FSL to use my address for future related soccer activities sponsored by the FSL.

Parent Signature: _____

Date: _____

