

Panorama Soccer Club Spring 2012 Registration

Players Must be 4 years old by 7/31/11

In Person: at the
Panora Public Library **OR** Guthrie Center Public Library
Wed., January 11, 2012 Thurs., January 12, 2012
5:00 - 7:00 p.m. 6:00 - 7:00 p.m.

By Mail: Panorama Soccer Club
PO Box 584
Panora, IA 50216
Questions: Brandon Waddle 641-755-3780

*Soccer Merchandise will be available for purchase and a Swap table w/ used soccer gear will be set up at both sites Registrations **must be received or postmarked by January 12th** to guarantee placement on a team.

PLEASE use separate form for each player - please print and fill out complete form.

Player's Last Name _____ First Name _____ DOB _____
 Street _____ Age _____
 (as of 7-31-11)
 City _____ Zip _____ Home Phone _____ Gender: Male ___ Female ___
 School Grade (Fall 2011) _____

Parent/Guardian Names: Home homes: Cell Phones: Work Phones: If listed,
 1) _____ (if different than above) _____ (____) _____ (____) _____ email will
 (last) (first) _____ (____) _____ (____) _____ be used for
 Email Address: _____ most of the
 2) _____ (____) _____ (____) _____ contacting
 (last) (first) _____ (____) _____ by club,
 Email Address: _____ coaches,
 etc.

Please NOTE: if any contact or personal information has changed please check here: _____
 Mother's/Guardian's birth date (for posting purposes only) -month _____ day _____
 Health concerns your coach should be aware of: _____
 Person to notify if parent/guardian cannot be reached: _____ Phone:(____) _____

Volunteers – Make our Club a SUCCESS!!

The Panorama Soccer Club depends on volunteers. Every family must check at least one of the following areas in which to help. The Club will provide training opportunities and materials in all areas. Please write the family member name on lines of the areas marked.

<input type="checkbox"/> Head Coach _____ Disclosure form completed ___ Yes ___ No T-shirt size (circle) S M L XL or have one _____ 30*	<input type="checkbox"/> Assistant Coach _____ Disclosure form completed ___ Yes ___ No T-shirt size (circle) S M L XL or have one _____ 30*
<input type="checkbox"/> Financial Donation - \$25 minimum **This does not include fundraising. Donations are tax deductible	<input type="checkbox"/> Field Marking _____ *please mark your calendars: training day 3/10/12 @ 9:00 a.m. 40*
<input type="checkbox"/> Pre-season Field & Equipment Day Please mark your calendars: Date 3/10/12 @ 9:00 a.m. Rain Date 3/17/12 @ 9:00 a.m. 15*	<input type="checkbox"/> Post-season Field & Equipment Day Please mark your calendars: Date 6/16/12 @ 9:00 a.m. Rain Date 6/23/12 @ 9:00 a.m. 10*
<input type="checkbox"/> Currently volunteering as: _____ e.g. serving on board, directors, managers etc.	<input type="checkbox"/> Fundraising/Merchandise Committee: _____ Will help with candybar sales, Panorama Days etc. 6*

Note: A number of the volunteer areas have limited needs - the number needed is marked in each slot with an * - they will be filled on a **first come/first serve basis** - Please consider multiple areas to help or a 1st and 2nd choice.

New to club? Yes ___ No ___ **If yes, attach a copy of the player's birth certificate.**
 Did you **transfer** from another soccer club? Yes ___ No ___ If yes, which club _____

TEAMS	BIRTH DATES	REQUIREMENTS	COST
U6	8/1/05 - 7/31/07		\$35
U8	8/1/03 - 7/31/05	Must supply a billfold size picture for ID card	\$45
U10	8/1/01 - 7/31/03	Must supply a billfold size picture for ID card	\$45
U12	8/1/99 - 7/31/01	Must supply a billfold size picture for ID card	\$50
U14	8/1/97 - 7/31/99	Must supply a billfold size picture for ID card	\$50
U16 & up	7/31/97 & older	Must supply a billfold size picture for ID card	\$50

If you are in need of financial assistance please call: Shawn Wharton @ Panorama Schools 641-755-2021

Fees (separate form needed for each player)		
Team _____ (e.g. U6, U12)	\$	<input type="checkbox"/> Cash <input type="checkbox"/> Check # _____
Deduct: \$10 for second and subsequent family members	\$	Date Rec'd _____ By: _____
	\$	
Add: Tax deductible Financial donation	\$	
Total Fees for this player:	\$	Siblings also playing soccer: __ U6 __ U8 __ U10 __ U12 __ U14 __ U16
<i>Make checks payable to Panorama Youth Soccer Club A \$20 fee will be imposed on all returned checks.</i>		Total paid this player \$ _____ Total paid by family \$ _____

Consent

I hereby give consent for my child to participate in and abide by all rules and regulations of the Iowa Soccer Assn. & the Greater Des Moines Junior Soccer League and the Panorama Soccer Club. As parent/guardian of the above child, I acknowledge that there is a risk of injury with all recreation, and in consideration of said child being allowed to participate in the Panorama Soccer Club, I assume all risk of injury to the child and hereby agree to indemnify and hold harmless the Panorama Soccer Club and any agents, servants, and employees from any claims, demands, or liability arising out of said child's participation in the Panorama Soccer Club.

I understand NO EARRINGS ARE ALLOWED. Earring must be taken out during play - no band aids or taping allowed. Please do not have your child's ears pierced right before or during the season. They will NOT be able to play if they can't remove them.

I also understand that my son or daughter's picture may be taken individually or as a team and used for publicity purposes.

Parent/Guardian Signature _____ Date _____

Signature is required before application is accepted

There are NO refunds of registration fees except in the event that a team is not able to be formed due to lack of players or coaching volunteers.

The 2012 Spring Season games begin the weekend of **March 31st** and ends the weekend of **June 2nd**.