

Recreational Player Checklist

Name: _____

Team/Coach Request: _____ (Every effort is made, but not guaranteed)

_____ USYSA Registration Form

_____ Birth Certificate

_____ Signed Code of Conduct

_____ Photography Waiver

_____ Registration Fees \$ _____ Check # _____ Cash ____ Credit Card _____

League: Recreational Age Group: _____

Club: Midwest City Soccer Club



Last Name: _____ First Name: _____ Init: ___ Birthdate: _____ M / F

Address: _____ City: _____ State: OK Zip Code: _____

Phone: (____) _____ Email: _____

Fathers Name: _____ Phone: _____

Fathers Email: _____

Mothers Name: _____ Phone: _____

Mothers Email: _____

List any medical conditions player has: _____

Person to notify in case of emergency if parents not present: _____ Phone: _____

Doctor to notify in case of emergency if parents not present: _____ Phone: _____

Seasons Played _____ Last Team _____ Last Club _____

Other children in club: _____, _____, _____

Parent/Guardian consent and medical release

Recognizing the possibility of injury or illness, and in the consideration for US Youth Soccer and members of US Youth Soccer accepting my son/daughter as a player in the soccer programs and activities of US Youth Soccer and its members (the "Programs"), I consent to my son/daughter participating in the programs. Further, I hereby release, discharge, and otherwise indemnify US Youth Soccer, its member organizations and sponsors, their employees, associated personnel, and volunteers, including the owner of fields and facilities utilized for the programs, against and claim by or on behalf of my player son/daughter as a result of my sons/daughter's participation in the programs and/or being transported to or from the programs. I hereby authorize the transportation of my son/daughter to or from the Programs.

My player son/daughter has received a physical examination by a licensed medical doctor and has been found physically capable of participating in the sport of soccer. I have provided written notice, which is submitted in conjunction with this release and attached hereto, setting forth any specific issue, condition, or ailment, in addition to what is specified above, that my child has or that may impact my child's participation in the Programs. I give my consent to have an athletic trainer and/or licensed medical doctor or dentist provide my son/daughter with medical assistance and/or treatment and agree to be financially responsible for the reasonable cost of any such assistance and/or treatment.

Signature of Parent/Guardian

Date



Midwest City Soccer Club

SOCCER PLAYER/PARENT/COACH CODE OF CONDUCT/

Players Name:

1. I will remember that my child participates in soccer to have fun and that the game is for youth, not adults.
2. I (and my guests) will learn the Laws of the Game and the policies of the Midwest City Soccer Club.
3. I (and my guests) will be a good representative of the Midwest City Soccer club by following the policies of the Soccer Club I am visiting.
4. I (and my guests) will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy, and by demonstrating positive support for all players, coaches, referees, assistant referees, and spectators at every game and practice.
5. I (and my guests) will not engage in any kind of unsporting conduct with any referee, assistant referee, coach, player, or parent such as booing and taunting; refusing to shake hands; or using profane language or gestures.
6. I will not encourage any behavior or practices that would endanger the health and well-being of the players and officials.
7. I will teach my child to play by the laws of the game and to resolve conflicts without resorting to hostility or violence.
8. I will demand that my child treat other players, coaches, referees, assistant referees, and spectators with respect regardless of race, creed, color, sex or ability.
9. I will teach my child that doing one's best is more important than winning so that my child will never feel defeated by the outcome of the game or his/her performance.
10. I will praise my child for competing, trying hard and make my child feel like a winner every time.
11. I will never ridicule or yell at my child or other participants for making a mistake or losing a competition.
12. I will emphasize skill development and practices and how they benefit my child over winning.
13. I will promote the emotional and physical well-being of the athletes ahead of any personal desire I may have for my child to win.
14. I will respect the referees, assistant referees, and their authority during games, will never question, discuss or confront coaches at the game field, and will take time to speak with coaches at an agreed time and place.
15. I will demand a sports environment for my child that is free from drugs, tobacco, alcohol and I will refrain from their use within the Midwest City Soccer Club.
16. I will refrain from coaching my child or other players during games and practices unless I am one of the official team coaches.

I understand the MWCSC prohibits the use of alcohol, tobacco, e-cigarettes or vapes on the premises (including parking areas)

I understand that **NON-SERVICE PETS** are prohibited.

No Glass Containers are permitted.

Parking is only permitted in PAVED designated parking areas

I also understand that if I fail to abide by the aforementioned rules and guidelines, I will be subject to disciplinary action that could include but is not limited to the following:

1. Verbal warning by the head coach, field marshal, or any Midwest City Soccer Club Board Member.
2. Written warning.
3. Game suspension with written documentation of incident kept on file by the Midwest City Soccer Club.
4. Season suspension.

Parent or Legal Guardian

Date



Midwest City Soccer Club

P.O. Box 30586, MWC, OK 73140 ☐ *Physical:* 1799 National Blvd., MWC, OK 73110
www.mwcsoccer.org www.facebook.com/MWC.Soccer.Club

PARENT COPY: SOCCER PLAYER/PARENT/COACH CODE OF CONDUCT

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MWCSC Complex Rules

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Photography Waiver and Release Form

At Midwest City Soccer Club (MWCSC), we really enjoy soccer and the fitness that it brings with it. As such, we like to share our enjoyment of the game with others. For this reason, MWCSC periodically uses photographs, videos, profiles, and stories for products that are promotional, advertising, commercial, educational, research, and/or archival in nature. As such, MWCSC collects, on an ongoing basis, individual and group photos and testimonials relating to our volunteers, supporters and activities involving soccer and fitness and we would like your permission to use those in a positive manner.

I, _____, hereby grant Midwest City Soccer Club and its

legal representatives the irrevocable right and unrestricted permission to use and publish photographs or video images of me and/or my family, or any in which I or my family may be included, for any purpose authorized by Midwest City Soccer Club including, but not limited to: website use, Facebook use, editorial publications, catalog and advertising use. This grant included the right to modify and retouch images in the discretion of the Midwest City Soccer Club. I understand that the circulation of such materials could be worldwide and that there will be no compensation to me for this use.

Furthermore, I understand that I will not be given the opportunity to inspect or approve the finished products or the advertising copy or the printed matter that may be used in connection therewith. In granting this permission to Midwest City Soccer Club and its legal representatives, I am fully and without limitation releasing it from any liability that may arise from the use of the images.

(Signature)

(Date)



Midwest City Soccer Club

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Registration/Refund/Proof of Age Policies

1. I understand that registering with the Midwest City Soccer Club (MWCSC) does not guarantee placement on a MWCSC team.
2. I understand that there is no refunds unless there is not space on a team for my child. If there is not space I will receive a refund of my registration fee for my child.
3. If I have multiple children I understand I will only receive a refund for the child that a team was not available, not all my enrolled children.
4. I understand that The MWCSC wants to offer the best possible experience for my child. Due to this I may be required to travel for practices, games, and events.
5. I understand that the MWCSC is a volunteer organization, and as such, may need my help to keep the organization and complex running smoothly.
6. I understand that the player being registered today will not be considered completely registered or placed onto a team until I provide valid proof of age(i.e. Birth Certificate, Driver's License, Passport, etc...) This can be provided by uploading the proof of birth into the players account or emailing a PDF/photo of the proof of birth to President@mwcsoccer.org. Proof of birth will not be kept on file after verified in the players getsoccer account. Past players that have already provided proof of birth do not need to provide it again.

(Signature)

(Date)