



RICHMOND KICKERS YOUTH SOCCER CLUB
POCOSHOCK DIVISION

Serving Chesterfield County and Surrounding Areas Since 1979

www.richmondkickers.com

2320 W. Main Street Richmond, VA 23220

Phone: (804) 644-KICK (5425) Fax: (804) 359-6005



SPRING 2006 RECREATIONAL SOCCER SEASON

Last Name: _____ First Name: _____ MI: _____ Nickname _____

Date of Birth: ____/____/____ (New Participants must include a copy of Birth Certificate) () Male () Female

Street Address: _____ Apt.#: _____

City: _____ State: _____ Zip: _____ Subdivision _____

Home Phone: _____ Email Address: _____

Nearest Elementary School (based on your current address) _____ Chesterfield County Resident: Yes ___ No ___

Father's Name: _____ Address: _____ Phone (H) _____

(W) _____ (Cell) _____ Alternate Email _____

Mother's Name: _____ Address: _____ Phone (H) _____

(W) _____ (Cell) _____ Alternate Email _____

Parental Support We ask for active participation of all parents in our program. Check area(s) in which you would be willing to help:

() Coach () Asst. Coach () Team Parent/Mgr. () Referee () Field Maintenance () Office Support () Tournament

Player's Experience: (circle one) None PVYSL Other _____ # of seasons _____

Team Type Preference: (please check one) Coed (7/31/2002 – 8/1/1986) _____ All Girls (7/31/1999 – 8/1/1986) _____

I Can Not Practice On: M T W TH F (circle all that apply)

Special Requests Cannot Be Guaranteed - Please Submit In Writing Any Special Requests You Would Like Us To Consider, Such As Car Pooling.

Parent's Comments/Request: _____

RECREATION FEES:

Early Registration Fee ----- \$70.00
Registration Received *after* 1/30/2006 - \$85.00
Non-Chesterfield County Residents Add \$10.00
Deduct \$5.00 from Registration Fee For Each Additional Player in Household
Financial Assistance is available – Contact our office for more information

RECREATION UNIFORM ORDER FORM

\$30.00 - Consists of two jerseys, shorts, and two pairs of socks
Sizes Youth X Small – Adult X Large _____

REPLACEMENT UNIFORM PIECES

Jerseys \$10.00 each Size _____ White _____ Gold _____
Shorts \$7.00 Size _____
Socks \$5.00 Qty _____

*****New Uniforms - Uniforms changed for the Fall 2005 Season. New Players for the Spring 2006 Season will be required to purchase the uniform kit*****

REFUND POLICY: There will be no refunds for any reason other than the following: (1) Not being able to place a child on a team due to full division (2) A lack of coach volunteers (3) Player is medically unfit to play the first scheduled game (documented by physician's statement) (4) Family relocation.

Consent to Play: I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of VYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for RKYSC/PVYSL accepting the registrant for its soccer programs and activities (the "Programs"), I hereby release, discharge and/or otherwise indemnify VYSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

(Signed) _____ Date: _____

FOR STAFF USE ONLY

Registration Fee: \$ _____ Uniform Fee: \$ _____ Date Rcvd: _____ Cash/Check # _____ Rcvd By: _____ Posted to Database _____