

# Boston Youth Soccer League

## Registration – 2018

**GENERAL INFORMATION:** Please fill in ALL applicable information and submit with your fee of \$50 per child. Please Mail to BYSL, P.O. Box 156, Boston NY 14025 or register online at <https://bostonyouthsoccer.demosphere-secure.com/registration>. Registration is due on June 30th, 2018. The season starts Aug 6th. Mandatory evaluation days are July 10th, 12th and 17th. Your child must make 1 or both of the dates set aside for his/her age group. Games start at 6:00pm. No games are scheduled for Labor Day or the first days of school. Player must be at least 5 years old but not older than 13 years of age on December 1 2018 . There are 4 divisions depending on registration numbers: Preps (5-6 years old); Freshmen (7-8 years old) Juniors (9-10 years old); Seniors (11-13 years).

### Registration Information:

Family Name \_\_\_\_\_  
#1 Child's Name \_\_\_\_\_ Birth date \_\_\_/\_\_\_/\_\_\_  
Soccer Experience \_\_\_ years. Shirt Size YS YM YL AS AM AL AX Sex M / F  
#2 Child's Name \_\_\_\_\_ Birth date \_\_\_/\_\_\_/\_\_\_  
Soccer Experience \_\_\_ years. Shirt Size YS YM YL AS AM AL AX Sex M / F  
#3 Child's Name \_\_\_\_\_ Birth date \_\_\_/\_\_\_/\_\_\_  
Soccer Experience \_\_\_ years. Shirt Size YS YM YL AS AM AL AX Sex M / F  
Address \_\_\_\_\_ Town \_\_\_\_\_  
Zip \_\_\_\_\_ Home phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Email Address \_\_\_\_\_ cell \_\_\_\_\_  
Father's Name \_\_\_\_\_ Email Address \_\_\_\_\_ cell \_\_\_\_\_  
Emergency Number \_\_\_\_\_ Name \_\_\_\_\_  
Special Medical Information \_\_\_\_\_

*We need your Help!* Please check where you can volunteer your time and talent: \_\_\_\_\_

(Ex. Coaching, Obtaining Sponsors \$, Schedule, Picnic, Setting up goals, Ordering Uniforms)

*We also need Referees!* These are paid positions. Referees must be at least 15 years old. Please contact Nicole Rooney for more information at 422-0023 or email at [bostonyouthsoccerleague@gmail.com](mailto:bostonyouthsoccerleague@gmail.com).

For more information, contact Nicole Rooney at 422-0023 or [bostonyouthsoccerleague@gmail.com](mailto:bostonyouthsoccerleague@gmail.com), link to online registration is at <https://bostonyouthsoccer.demosphere-secure.com/registration>. Join the facebook group at <https://www.facebook.com/groups/BostonYouthSoccerLeague/>

<b>League Use only</b> Date _____ Amount \$ _____ Cash or Check # _____
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I HAVE READ AND UNDERSTAND THE PARENTS' CODE OF ETHICS / CONDUCT/ DISCLAIMER AS SHOWN ON THE TOWN OF BOSTON'S WEBSITE AND AGREE TO FOLLOW THE PRINCIPLES SET FORTH BY THE BOSTON YOUTH SOCCER LEAGUE SPORTS PROGRAM : [http://www.boston-ny.com/uploads/7/8/9/7/78977060/bysl\\_ethics\\_conduct\\_disclaimer.pdf](http://www.boston-ny.com/uploads/7/8/9/7/78977060/bysl_ethics_conduct_disclaimer.pdf)

Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_