



**Grand Junction Soccer Club**  
**A Premier Colorado Soccer Club 33 Years Strong**

Soccer Office—in Independence Plaza (by Sam's Club)  
 529 25 1/2 Road, Suite B112  
 Grand Junction, CO 81505  
 Phone: **970.242.4550** Fax: 970.242.4971

<b>FEES:</b>	<b>PAID \$</b> _____
U4-U7 60.00 _____	CK# _____ CC ___ Cash ___
U8 75.00 _____	REG DATE ___/___/___
U9-U10 80.00 _____	INITIALS _____
SIB DISC <u>-10.00</u> _____	Late Fee 5.00 ___ 15.00 ___

\*\*\*\*ONLINE REGISTRATION NOW AVAILABLE: [www.grandjunctionsoccer.org](http://www.grandjunctionsoccer.org)\*\*\*\*\*

**REGISTRATION DEADLINE January 29th, 2010**

**Player Information**

Player's Name \_\_\_\_\_ Gender \_\_\_\_\_

Home Phone \_\_\_\_\_ Email \_\_\_\_\_ Birthdate \_\_\_/\_\_\_/\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mother/Stepmother \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Father/Stepfather \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Medical Concerns \_\_\_\_\_

Coach Preference or Special Request **NOT GUARANTEED** \_\_\_\_\_

Previous Team Name or Coach \_\_\_\_\_ Number of Seasons Played \_\_\_\_\_

Closest Middle School (to determine team placement) \_\_\_\_\_

**Program Registration**

- U4 BIRTH DATE 8/1/05 – 7/31/06
- U5 BIRTH DATE 8/1/04 – 7/31/05
- U6 BIRTH DATE 8/1/03 – 7/31/04
- U7 BIRTH DATE 8/1/02 – 7/31/03
- U8 BIRTH DATE 8/1/01 – 7/31/02
- U9 BIRTH DATE 8/1/00 – 7/31/01
- U10 BIRTH DATE 8/1/99 – 7/31/00
- LATE REGISTRATION 2/1/10-2/12/10 \$5.00
- FINAL REGISTRATION 2/15/10 \$15.00

**Parent Volunteer Interest**

Every recreational team needs parent volunteers to fill four key positions—coach, assistant coach, referee, and team manager. GJSC offers clinics and materials to help support parents so they can participate in their child's soccer experience. Please volunteer for one of the following positions. We do provide a discount voucher of 5.00 for the coach, assistant coach & referee (to be used on the following season's registration fee) after completion of the season and completion of the age appropriate coaching or referee clinics. Additionally, GJSC will provide shirts for the Coach, Assistant Coach and the Referee. Returning coaches in good standing will be given first choice of position.

- Coach Provides direct instruction of team. Chooses practice night and time
- Assistant Coach Provides support for head coach. One per U4-U8, preferably 2 for U9-U10, appointed by head coach
- Team Manager Provides administrative support for team. One per team.
- Referee (New) Must attend free 2 1/2 hour training course
- Returning Referee or Linesperson Must attend free 1 hour refresher course

All volunteers **MUST** complete a Volunteer Disclosure Form (forms available in the office and online).

**Medical Release and Liability Waiver**

This is to certify that the above-named player has my permission to play in the Grand Junction Soccer Club recreational league. I have listed any known physical or health restrictions on this player's ability to participate in the soccer program. I understand that participation in this sports activity could result in injury to my child and I do hereby release on behalf of myself and my child, GJSC, its employees and agents, volunteers, members, and officials from any liability. As the parent or legal guardian of the above-named player, I hereby give my consent for emergency care prescribed by a duly licensed Doctor of Medicine or doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb, or well-being of my dependent. GJSC also has my permission to use my child's photo for promotional materials, such as flyers, advertisements, and website content.

**Refund Policy**

I have read and accept the GJSC Recreational Soccer Policy Statement as outlined below. It is the policy of GJSC to refund registration fees only if you move out of town prior to the start of the season or if the child is unable to participate due to injury or illness as documented by a physician. **No refunds, credits or fee transfers will be allowed for any other reasons.** If GJSC is unable to place your child on a team, a full refund will be issued. If we are unable to honor a special request, there will be no refund. Conflicts with practice schedules are not grounds for refunds. **No refunds, credits or fee transfers will be granted for players after the third scheduled game of the season. Refund requests due to injury must be made within 2 weeks of injury or illness and must have a doctor's note included.** Recreational refunds granted are subject to a \$20.00 handling fee except for those cases where GJSC cannot place a child.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**GJSC Mission Statement:**

**The Grand Junction Soccer Club is dedicated to providing year around soccer opportunities that are fun, positive and challenging for individuals of all ages, abilities and financial means.**