

Northwest Soccer Club Registration Information

Teams are formed by the player's date of birth according to the chart below:

AGE GROUP	BIRTHDATES		SEASON FEES	
	FROM	TO	BEFORE Sat, January 25, 2020	AFTER Sat, January 25, 2020
06U	2014	2015	\$60* (\$80 if non-volunteer fee)	\$80* (\$100 if non-volunteer fee)
08U	2012	2013		
10U	2010	2011	\$80* (\$100 if non-volunteer fee)	\$100* (\$120 if non-volunteer fee)
12U	2008	2009		
14U	2006	2007		
16U	2004	2005		
19U	2001	2003		

A fee of \$20 is REQUIRED if you are unable to be a Volunteer

IN-PERSON REGISTRATION INFORMATION

- Walk-up registration is Saturday, January 11, 2020 from 10:00 AM to 2:00 PM at Douglas Ave. Presbyterian Church, 4601 Douglas, Ave.

UNIFORM INFORMATION

- 06U and 08U players: Will be issued a club t-shirt.
- 10U and above: Will need to purchase a uniform set that consists of 2 jerseys, 1 pair of shorts and 2 pairs of socks. Uniforms must be ordered, either online at myuniform.soccermaster.com/store/clubs or at Soccer Master, 3233 100th St., Urbandale (515-270-8141). They do not stock enough uniforms to accommodate walk-ins.

GENERAL INFORMATION

- Players who register after the Deadline will not be guaranteed a place on a team.
- Spots on existing teams will not be guaranteed for returning players who register after the deadline.
- Un-honored checks will be assessed a \$14.00 surcharge
- NO REFUNDS** will be given unless the club is unable to place a player on a team.
- Limited Scholarships are available. To be considered for a Scholarship applications **MUST** be completed in full and turned in with the registration form before the deadline.

HELP US RECRUIT AND YOU MIGHT EARN A REGISTRATION REBATE!

If you get 3 players, NEW to our club, to join Northwest Soccer Club timely you can get a rebate of 50% of your registration fee (minus any "Non-volunteer" fee). To qualify your registration and the referrals must be complete by the registration deadline (no missing information, fees, birth certificate or returned check) and referrals placed on a team this season. Just clearly write your first and last name on the referral space on the registration form.

Spring 2020 Northwest Soccer Club Registration Form

PLEASE print clearly on this registration form to enable us to enter your information accurately and avoid delays in communication.

Player's Information:

Name: _____ Phone: _____

Sex: M ___ F ___ Birthdate: _____ School: _____

Player's Mother's Birthdate: _____ Age in calendar year 2019: _____

Address: _____

City: _____ Zip Code: _____

Phone: _____ Email Address: _____

Has player previously played with Northwest Soccer? Yes ___ No ___

If yes, who was player's most recent coach? _____

If no, a copy of the player's birth certificate must be included.

Primary Guardian's Information:

Name: _____

Address (if not same as above): _____

Phone: _____ Email Address: _____

Secondary Guardian's Information:

Name: _____

Address (if not same as above): _____

Phone: _____ Email Address: _____

I hereby consent to the release and publication without payment or royalty of my child's image related to Club purposes, as well as to the release of my information to partner organizations and for my child to participate in and abide by all rules of Northwest Soccer Club and the Iowa Soccer Association. As parents or guardians of the above child, we acknowledge that there is risk of injury with all recreation, and in consideration of said child being allowed to participate in the Northwest Soccer Club, we assume all risk of injury to the child and hereby agree to indemnify and hold harmless the Northwest Soccer Club and the agents and employees from any claims, demands or liability arising from said child's participation in the Northwest Soccer Club.

Parent/Guardian Signature

Date

Northwest soccer exists due to the commitment of parents like you. To ensure that the club continues to make soccer available, please circle the areas in which you can help.

You must select one or add the non-volunteer fee of \$20 – NO EXCEPTIONS

Coach / Asst. Coach	Referee (Must Be Certified)	Team Parent	Special Projects (Clinics/Fall Soccer Fest)	Board Representative
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Volunteer Name: _____ Phone: _____

Referred by: _____

Mail forms to: Registrar, 4018 39th Place, Des Moines, IA 50310

Fee: ___ Late Fee: ___ Check #: ___ BC: ___ Donation: ___ Date Rcvd: _____