

# REMINDER

Registration forms are due no later than  
**June 9, 2010**

Any player whose registration is received after June 9, 2010 will be put on a waiting list without guarantee of a roster spot. All late registrations must be accompanied by a \$10.00 late fee per child.

**Walk in Registration at**  
**BRAINTREE HIGH SCHOOL**  
**MAIN FOYER**

May 27, 2010      Thursday      6:30-8:00 PM

### Mail in Registration

Clip along line and return registration form and check made payable to Braintree Youth Soccer to:

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Braintree Youth Soccer  
P.O. Box 850-725  
Braintree, MA 02185-0725

**On-Line Registration Open NOW!!**

[www.braintreeyouthsoccer.org](http://www.braintreeyouthsoccer.org)

Your login name is your email address. If you have changed your email in the last year, please use your old address to login and click on the "Modify Family Info" button to update your information.

If you have forgotten your login name or password, contact our registrar Deb McMartin at [braintreeyouthsoccer@gmail.com](mailto:braintreeyouthsoccer@gmail.com).



*Enjoy the excitement of youth soccer.*

## BRAINTREE YOUTH SOCCER

### Braintree Youth Soccer Officers

President	Jim Sullivan	849-8159
Vice President	Anne Murphy	843-9984
Vice President	Joe Hubbard	843-0240
Treasurer	A.J. Catanese	356-8216
Clerk	Paul Machado	848-5787

### BYS Fall 2010 Registration Form

Registration Deadline is June 9, 2010

*Registration is available in person, by mail  
or our preferred method...online.*

Please visit our website at  
[www.braintreeyouthsoccer.org](http://www.braintreeyouthsoccer.org)  
and click on the registration link.





- Minimum age required to play is five years as of August 31, 2010. (Born on or before 8/31/05)
- This is a recreational league open to both boys and girls in Grades K through 8.
- **All Games begin on September 11, 2010**
- Games are played at East Middle School and Thayer Academy South Athletic Complex which is located on Route 37/ Washington Street.
- A coach will contact you after the coaches meeting (in late August) with information regarding your child's team and schedule.

- **Registration Fees:** \$ 65.00 for the 1<sup>st</sup> child  
\$ 20.00 for the 2<sup>nd</sup> child  
\$100.00 max per family  
\$ 10.00 late fee per child after June 9, 2010

*\*Check made payable to Braintree Youth Soccer (BYS)*

- Try out the convenience of ON-LINE Registration. Pay by credit card or check. Visit our website

**www.braintreeyouthsoccer.org**



**REGISTRATION FORM** (One player per form or copy of form)

Player's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Parent / Guardian #1: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Fall 2010: Grade: \_\_\_\_\_ School \_\_\_\_\_

Male: \_\_\_\_\_ Female: \_\_\_\_\_

Played in BYs Fall 2009 program? (Y / N)

**VOLUNTEERS ARE NEEDED!**

Coach [ ] Assistant Coach [ ] Field Crew [ ] Snack Bar [ ]

Name \_\_\_\_\_

(Please write your legal name – i.e. Michael not Mike; Edward not Ted, etc.)

Address: \_\_\_\_\_

Date of Birth (MM/DD/YYYY) \_\_\_\_\_

**Please circle the level of your coach's license:**

**G F E D No License Other**

\* All coaches must obtain at least a G License. Courses are available throughout the year and online. BYs will pay for the training.

\*\* All volunteers are subject to a CORI background check as required by Massachusetts Law.

**BYS Consent and Authorization**

I agree to abide by the rules of the United States Soccer Association ("USYSA"), the Massachusetts Youth Soccer Association ("MYSA"), The Braintree Junior Soccer League, Inc ("BYS") and their respective affiliated organizations and sponsors. I authorize and consent to the administration of any medical and/or dental care or treatment determined to be necessary in the event of a personal injury to the Player which may result from his/her participation in any soccer program, which care or treatment may be given under whatever conditions are necessary to preserve life, limb and the well being of the Player and agree to release discharge and/or otherwise indemnify USYSA, MYSA, BYs, the Town of Braintree and their respective affiliates, boards, commissions, sponsors, employees, coaches, assistant coaches and associated personnel including, without limitation, the owners of fields and facilities used for soccer programs, against all claims by or on behalf of the undersigned and/or the Player as a result of the players participation in soccer programs and/or being transported to or from the same which transportation has been specifically authorized by the undersigned and/or any other legal guardian of the Player. I hereby consent to publication of photographs and the likeness of the player on the BYs website, newspapers and any other publications or medium.

Dated: \_\_\_\_\_

Signature of Parent/Guardian

Administrative use only:

Date rec'd:

Check #:

Check Amt: