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REGISTER ONLINE AT  
WWW.AZYSL.ORG



- ⚽ OUTDOOR SOCCER GAME LOCATIONS FOR AVONDALE, EL MIRAGE, PEORIA, GLENDALE, PHOENIX & SURPRISE
- ⚽ INDOOR SOCCER GAME LOCATION: BIG LEAGUE DREAMS, GILBERT AZ
- ⚽ WEEKLY PRACTICES
- ⚽ GAMES EVERY SATURDAY (EXCLUDING HOLIDAYS)

# SPRING 2016 REGISTRATION INDOOR SOCCER and OUTDOOR SOCCER

## INDOOR SOCCER LEAGUES

- 6 Years Old and Under
- 8 Years Old and Under
- 10 Years Old and Under
- 12 Years Old and Under
- 14 Years Old and Under

## OUTDOOR SOCCER RECREATIONAL LEAGUES

- 6 Years Old and Under
- 8 Years Old and Under
- 10 Years Old and Under
- 12 Years Old and Under

- Participants will be placed on a team by the zip code provided, or by the team requested if space available.
- Practice locations and times are decided by the volunteer Head Coach on a team-by-team basis.
- Practices are typically Mon/Wed or Tues/Thurs and start no earlier than 6pm.
- Practices typically begin 2 weeks prior to the first game.

## REGISTRATION

Registration Deadline: March 18, 2016

### INDOOR SOCCER

Individual Registration Fee: \$75  
Or Team Fee: \$575  
Includes Awards

### OUTDOOR SOCCER

Registration Fee: \$75  
Includes Jersey & Participation Award

## IMPORTANT DATES

### Registration Deadline:

March 18, 2016

### Schedule Release:

Outdoor: March 21, 2016  
Indoor: March 28, 2016

### First Official Game:

Outdoor: March 26, 2016  
Indoor: April 2, 2016



## INDOOR SOCCER



## OUTDOOR SOCCER

LEAGUE AGE AS OF 7/31/15 » 8 GAMES GUARANTEED » BOYS AND GIRLS WELCOME!



## Registration Form (One Child Per Form)

Child's Last Name: \_\_\_\_\_ Child's First Name: \_\_\_\_\_

Child's Age (As of 7/31/15): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent/Guardian Full Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Sport & Division: \_\_\_\_\_

Coach/Team/Friend Request (If applicable): \_\_\_\_\_

T-Shirt Size: YS YM YL AS AM AL

Alternate Phone: \_\_\_\_\_

Please provide at least ONE phone number so that the league may contact you to place your child on a team, your assigned team may contact you, and/or the league may contact you regarding your child.

**Volunteer:** (No registration fee for Head Coach's child!)

Head Coach  Assistant Coach

Parent/Guardian Signature (Required): \_\_\_\_\_

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

By signing this form, my child and I hereby acknowledge and fully understand that the Parents/Legal Guardians assume all risk of injury. Serious injury can include bruises, broken ones, torn ligaments, cuts, spinal injury head injuries, brain damage & death. Parents/Legal Guardians assume the risk of harm from the inherent dangers of sports itself, from failure to consult with proper healthcare or medical providers regarding the proper size, fit, & application of the equipment available, &/or failure to purchase &/or to properly use any available equipment. I agree to indemnify and hold harmless and defend AYSL and its officers, directors, agents, servants volunteers and employees from any and all claims resulting from injuries, including death, damages and losses sustained by me or my minor child arising out of, connected with, or in any way associated with the activities of the event(s). AYSL does not provide medical insurance and is thereby not responsible for any medical costs. I understand the "No Refund" policy regarding participation with AYSL. AYSL reserves the right to use any photograph or videography taken during an AYSL sponsored event without the expressed written permission of the subjects included within the photo or video. Photos may be used in publications or other media material produced, used or contracted by AYSL including but not limited to: view books, catalogues, search pieces, newspapers, magazines, television, websites, etc.

## OFFICE USE ONLY

Reg. Date \_\_\_\_\_ Received \_\_\_\_\_  
Amt. Paid \_\_\_\_\_ Entered \_\_\_\_\_  
Check # \_\_\_\_\_ CC Auth # \_\_\_\_\_  
Cash \_\_\_\_\_