



Lancaster Select Soccer Assoc, Inc
 PO Box 1240 • Lancaster, Ohio 43130-6040
 www.lancasterselectsoccer.com
 lancasterselectsoccerassoc@gmail.com

Fall 2010/Spring 2011
 Tryouts

U12 and Younger: Tuesday, June 1, 2010 & Thursday, June 3, 2010 from 6:00 PM to 8:00 PM
U13 and Older: Monday, June 8, 2010 & Thursday, June 10, 2010 from 6:00 PM to 8:00 PM

Please complete this form and bring it with you to the tryouts at the East Main Street Soccer Complex

Player Information

Name: _____ Home Phone: (_____) _____ - _____
 Address: _____ Player Cell: (_____) _____ - _____
 City: _____ Date of Birth: MM _____ DD _____ YYYY _____
 State: _____ Zip code: _____ Email: _____

Acceptable methods to contact player: _____ Home Phone _____ Players Cell Phone _____ Player Email _____ Male _____ Female

Please check the age group in which the players birth date falls:

Birthday Must Fall Between		Birthday Must Fall Between		Birthday Must Fall Between	
_____ U8 -	08/01/2002 and 07/31/2003	_____ U12 -	08/01/1998 and 07/31/1999	_____ U16 -	08/01/1994 and 07/31/1995
_____ U9 -	08/01/2001 and 07/31/2002	_____ U13 -	08/01/1997 and 07/31/1998	_____ U17 -	08/01/1993 and 07/31/1994
_____ U10 -	08/01/2000 and 07/31/2001	_____ U14 -	08/01/1996 and 07/31/1997	_____ U18 -	08/01/1992 and 07/31/1993
_____ U11 -	08/01/1999 and 07/31/2000	_____ U15 -	08/01/1995 and 07/31/1996	_____ U19 -	08/01/1991 and 07/31/1992

Mothers Information

Name: _____ Home Phone: (_____) _____ - _____
 Address: _____ Cell: (_____) _____ - _____
 City: _____ Work: (_____) _____ - _____
 State: _____ Zip code: _____ Email: _____

Please select methods to contact: _____ Home Phone _____ Work Phone _____ Cell Phone _____ Email

Fathers Information

Name: _____ Home Phone: (_____) _____ - _____
 Address: _____ Cell: (_____) _____ - _____
 City: _____ Work: (_____) _____ - _____
 State: _____ Zip code: _____ Email: _____

Please select methods to contact: _____ Home Phone _____ Work Phone _____ Cell Phone _____ Email

Tryouts are free! Payment information is provided for players that are offered *and* accept a position with LSSA.

The non-refundable deposit is expected within 2 weeks of accepting a position or the position may be offered to another player.

For U8 through U14, a full year committed is expected unless arrangements are made with LSSA.

Choose a commitment option and select preferred billing option. Prices DO NOT include Player Uniforms.

\$450.00 Full Year Commitment

\$75.00 June (Non Refundable Deposit)
 \$75.00 July 15
 \$75.00 August 15
 \$75.00 September 15
 \$75.00 October 15
 \$75.00 December 15

Please
 Check
 One

\$225.00 Fall Only Commitment

\$75.00 June (Non Refundable Deposit)
 \$75.00 July 15
 \$75.00 August 15

Please
 Check
 One

\$225.00 Spring Only Commitment

\$75.00 December (Non Refundable Deposit)
 \$75.00 January 15
 \$75.00 February 15

Please
 Check
 One

Preferred Billing Option

_____ Please mail monthly statements
 _____ Please email monthly statements
 (One time charge of \$5.00 to cover postage and handling)

Payments are due by the 15th of the month. A \$5.00 Late Fee may be added for each payment not received by the 30th of the month.

Lancaster Select Soccer Association, Inc (LSSA) has my permission to post my child's picture on their website at www.lancasterselectsoccer.com.

No player names will be posted on the website.

I agree that Lancaster Select Soccer Association, Inc (LSSA, LSSA Officers and LSSA Coaches) shall not be liable for any injury or loss which my child may sustain while participating in this soccer program and agree to indemnify and hold harmless LSSA from any claim whatsoever. The above applicant is in good health and has my permission to participate in this program. In case of an emergency, I grant permission for my child to be given emergency medical treatment at a local hospital.

Signature: _____

Date: _____