



Ocean Township United Soccer Association
 8 Week Recreation Soccer Program
 Spring 2012

This program is available to youth in Kindergarten to Second Grades as of March 2012. Teams will be separated by gender and/or age, depending on the number of participants, with practices beginning mid-March. Games will be played on Saturdays beginning early April and continuing through May. Age appropriate shin guards are required, rubber cleats are recommended. NO JEWELRY IS PERMITTED AT GAMES OR PRACTICES.

Fee: \$65.00 if registered before December 1, 2011 / \$75.00 after December 1, 2011. (Checks payable to: OTUSA)

Reg: October, 2012 – February 28, 2012, Mail your registration and payment to OTUSA, 13 Barbara Ln, Oakhurst, NJ 07755.

The Ocean Township United Soccer Association will provide professional training sessions on Friday evenings.

If you are interested in working in the capacity of a Volunteer Coach, please note this on the registration form below. Volunteers must comply with the Ocean Township United Soccer Associations fingerprinting and coach’s training programs. Information will be forwarded to all registered volunteers.

Registration Form – Please print all information clearly

I. Family Contact Information

Adult Contact Name (First/Last): _____ Adult Contact DOB(mm/dd/yr): _____
 Mailing Address: _____ Town: _____ Zip: _____
 Home Phone: _____ Adult Contact Email Address: _____
 Adult Contact Cell Phone: _____ Adult Contact Day Phone: _____

II. Participant Information:

Participant Name (First/Last): _____ DOB: _____ Gender: M F
 Grade as of March 2012: _____
 Emergency Contact (First/Last): _____ Phone: _____

III. Youth Soccer Volunteer: I would like to volunteer (please circle and complete below): COACH ASST. COACH EITHER

Volunteer Name: _____ Address: _____
 Home Phone: _____ Day Phone: _____ Cell Phone: _____
 Email Address: _____

1. Does this program registrant require special assistance or accommodations to enjoy this program? _____ If yes please explain.
2. Due to the strenuous nature of the activity registrant should consult a physician prior to participation. It is the responsibility of the participant to inform the OTUSA of any physical disabilities that may limit their participation in the program.
3. The OTUSA has established a Participation Code of Conduct and it is understood that compliance is required for participation.
4. As per NJ State Law (P.L. 2006, Chapter 306), school age youth who wear corrective eyeglasses are directed to wear protective eyewear that meets established safety standards. Please consult your child’s eye doctor for specific information.

IV. Parent / Guardian Signature: _____

Official Use Only: Date: _____ Amount: _____ Check#/ Cash: _____ Team: _____