SIERRA MOUNTAIN SOCCER CLUB
MEMBERSHIP AGREEMENT
Fall 2010/Spring 2011 Season

Player Information

Last Name _____ First Name _____ Middle Initial _____

Mailing Address _____City _____ Zip Code _____

Phone _____ DOB _____ Please circle one: Male Female

Parent/Guardian Information

Father's Name _____ Work # _____ Cell # _____

Mother's Name _____ Work # _____ Cell # _____

Best E-mail address _____

Person to notify in case of emergency _____ Phone Number _____

We agree to participate in the Sierra Mountain Soccer Club for the 2010-11 Soccer year (includes both, fall 2010 and spring 2011 seasons for U10–U14 players) and will to the best of our ability conform to the guidelines, expectations and responsibilities listed in the Club Guide.

We have read and understand the policies for the Club as listed in the Club Guide and will assist our coach to create a positive environment for our team. We realize that if we do not meet the requirements for club participation, we will be dropped from the competitive team roster.

We understand that photographs may be taken of _____ during his/her involvement in SMSC. We give permission to use any such photos for advertising, in promotional materials or on the Club website.

We agree to provide to the Club: checks are made payable to Sierra Mountain Soccer Club

1. **Membership fees are due prior to each season ($550 fall season fees due at team meeting in July & $550 spring season fees due at team meeting in November/December.) Please notify your team manager if you require a payment plan application or scholarship application prior to your team meeting.**

2. **Required documents for registration with the League.**

Our registration fees include two tournaments. If our team decides to participate in additional tournaments, we agree to provide our share of the fees to the Club for the additional tournaments prior to the tournament date.

We are willing to volunteer our time to assist the Club in the following areas: please check one or more

___Referee ___Team manager ___Labor Day Tournament Committee ___Fundraising ___Awards BBQ

___Administrative assistance ___Board of Directors Member(must be elected) ___Adult Tourney ___Field/Equip

_____ _____ _____
Player Signature Date Team (age group/boys or girls)

_____ _____
Parent/Guardian Signature Date