



**2012 SPRING INDOOR RECREATIONAL SOCCER LEAGUES**  
 Presented by **BLAINE SOCCER CLUB** ★ PO BOX 490043 ★ **BLAINE, MN 55449**  
 Office : 763-792-7369 **www.blainesoccer.org**

The 2012 Spring Indoor Recreational Soccer Leagues are now forming and is available to all youth with-in the Twin Cities metro area with birth dates between August 1, 1996 and July 31, 2007. Players will be placed on teams based on the following age groups: U-5, U-6, U-7, U-8, U-10, U-12, and U-15's. All age groups U5-U12 will be separated into boys and girls teams, U15's will play Coed. BSC reserves the right to combine age groups or make leagues co-ed, depending on final registration numbers.

NEW Location for 2012: Fogerty Ice Arena has decided to pursue additional opportunities in their ice programming and will not have indoor turf facilities this year. For this reason, we have been able to secure time at the Goal Kick Indoor Soccer Center in Coon Rapids, a nearby boarded soccer facility within 10 minutes of Fogerty Arena (map posted on our web site).

The indoor season will begin mid March and finish up no later than early May. The U5-U8 will play primarily on Saturdays or Sundays, U10-U15 will play typically Mon/Thurs/Fri in the evening, Saturday and/or Sundays.

**Online Registration at:** [www.blainesoccer.org](http://www.blainesoccer.org) (Online registration is preferred registration method)

**Mail-In Registration:** **Blaine Soccer Club, PO Box 490043, Blaine, MN 55449.**

**Walk-In Registrations:** Wednesday, January 18<sup>th</sup> 6:00PM – 8:00PM BSC Office, 1467-101<sup>st</sup> Ave NE, Blaine (next to Soccer USA off Hwy 65)

**Drop-Off Anytime:** BSC Office 1467 – 101<sup>st</sup> Ave NE, Blaine (next to Soccer USA) After hours Drop Box is available Or City of Blaine Park and Recreation Department

**Guarantee Deadline:** Registrations **postmarked by January 19, 2012 will be guaranteed placement.** Registrations after January 19 will be placed on a wait list and will be accepted if space on teams allow. Due to the popularity of the Recreational League, please register early to guarantee your spot

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**2012 Spring Indoor Recreational League Registration**  
 Presented by **BLAINE SOCCER CLUB** ★ PO BOX 490043 ★ **BLAINE, MN 55449** ★  
 763-792-7369 **www.blainesoccer.org** to register online

<b>Age Group:</b> _____		<input type="checkbox"/> Male <input type="checkbox"/> Female
see back of this form		
<b>Players Name:</b> _____		<b>Birth date:</b> ____/____/____
Full First	Middle Initial	Last
<b>Address:</b> _____		
Street	City	Zip
<b>Phone:</b> _____ - _____ - _____		<b>School:</b> _____
		(Attending and/or Nearest Home)
<b>E-Mail Address:</b> _____		
<b>Father's Name:</b> _____		<b>Mother's Name:</b> _____
<b>Work Phone:</b> _____		<b>Work Phone:</b> _____
<b>Players Experience:</b>	Have You Played Soccer? _____	Number Of Seasons _____
	Are You A Traveling Player? _____	Number Of Seasons _____
<b>I Am Willing To Volunteer and my name is:</b> _____		
<b>Volunteer As:</b> Head Coach <input type="checkbox"/> Asst. Coach <input type="checkbox"/> Age Group Commissioner <input type="checkbox"/>		
All volunteer coaches and assistant coaches will need to submit to a confidential background check with the City of Blaine. All volunteer head coaches will receive 50% of their child's registration fee back at the end of the season.		
Buddy Request: You may, if you want, request to be placed on a team with <u>one</u> other player only. The other player should make the same request on their form. Requests are not guaranteed. Name of requested player _____		
Please Complete Other Side Of This Form		

**2012 Spring Indoor Recreation League:**[www.blainesoccer.org](http://www.blainesoccer.org) / 763-792-7369**Team Formation:** Teams are formed by the Blaine Soccer Club with individual players placed based on your "Buddy Request", a schoolmate and /or by neighborhoods where possible.**Player Notification:** A Coaches' meeting is scheduled for February 23, between 6:00 & 8:00pm at the Blaine Soccer Club Office depending on the age group. Coaches will then call players to confirm placement on their team on or before **3/2/12**. If you have not heard from a coach by **3/2/12** you may then contact the office for placement information.

Fees:	Age Group	Birth Date From	To	Fee	Program (add \$10 late fee after 1/19/12)
	U5 & Under	08/01/2006	07/31/2007	\$90	7 games / 1 scheduled practice at facility
	U6 & Under	08/01/2005	07/31/2006	\$90	7 games / 1 scheduled practice at facility
	U7 & Under	08/01/2004	07/31/2005	\$90	7 games / 1 scheduled practice at facility
	U8 & Under	08/01/2003	07/31/2004	\$90	7 games / 1 scheduled practice at facility
	U10 & Under	08/01/2001	07/31/2003	\$100	7 games / 1 scheduled practice at facility
	U12 & Under	08/01/1999	07/31/2001	\$100	7 games / 1 scheduled practice at facility
	U15 & Under	08/01/1996	07/31/1999	\$100	7 games / 1 scheduled practice at facility

**NEW:** There is a \$25 Discount applied for each 3<sup>rd</sup> child or more that is registered from the same family for the league**Additional Info:** Each player will receive a team shirt. Shin guards are mandatory at all games and practices. Tennis shoes or indoor turf shoes are needed. No jewelry is allowed. All participants will receive a participation award. Additional practices may be arranged by coach at other locations.**Refund Policy:** A \$25.00 non-refundable fee will be assessed for all cancellations. No refunds or cancellations will be honored after the season starts. A \$35.00 fee will be charged for any returned checks.**Registration Deadline is January 19, 2012.** Register early to ensure your placement on a team.**School District Disclaimer:** This event, class, activity or matter is not sponsored or endorsed by Anoka-Hennepin School District #11 or by Spring Lake park School District #16 and is not printed at either School Districts expense.

Detach and return the bottom of this form. Please keep top for your reference.

**List Any Medical Problems or Restrictions The Player Has:** \_\_\_\_\_**Person To Notify In Case Of Emergency: Name:** \_\_\_\_\_**Phone Number:** \_\_\_\_\_

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of Blaine Soccer Club, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the Blaine Soccer Club accepting the registrant for its soccer programs and activities (the "Programs"). I hereby release, discharge and/or otherwise indemnify the Blaine Soccer Club, it's affiliated organizations and sponsors, their employees, and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

Signature \_\_\_\_\_

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

Consent for Medical Treatment As the parent/legal guardian of a participant in the Blaine Soccer Club programs, I hereby give my consent for EMERGENCY medical care by a duly licensed doctor of medicine or doctor of dentistry. This care may be given under whatever conditions are necessary to preserve life, limb or well being of my dependent.

Signature: \_\_\_\_\_

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

Consent for Photo Release As the parent/legal guardian of a participant in the Blaine Soccer Club programs, I hereby give my consent for use of my child's photo to be displayed on the Blaine Soccer website and or local newspaper for the sole purpose of displaying participation in the program.

Signature: \_\_\_\_\_

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

**Office Use Only** Make Checks payable to Blaine Soccer Club

Cash/Check #: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Rec'd By: \_\_\_\_\_