

## Medical Information

**FLEC Student:** Yes No

If Yes: The below medical information does not need to be provided, but please agree to the following. My student information (including medical & parent's contact information) is up to date at FLEC.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### For all other students:

I / We, the parents of \_\_\_\_\_, give permission for emergency medical treatment of our child for illness or accident. Parent will be notified first if possible, but coach/staff may initiate emergency procedure if necessary prior to contacting parents.

Parent Name: \_\_\_\_\_

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

Additional Emergency Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

On Any Medication? Yes No If yes, explain: \_\_\_\_\_

Allergies? Yes No If yes, explain: \_\_\_\_\_

Does your child have an EPI Pen? Yes No If yes, where is the EPI Pen during soccer? \_\_\_\_\_

Does your child have an inhaler? Yes No If yes, where is the inhaler during soccer? \_\_\_\_\_

Medical conditions? Yes No If yes, explain: \_\_\_\_\_

Other applicable medical information: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Payment Information

Visa, MasterCard, and Discover

Amount: \$ \_\_\_\_\_ Check # \_\_\_\_\_ Cash Credit Card

Card # \_\_\_\_\_ Exp. \_\_\_\_\_ CVV# \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_

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

# Florida Christian Soccer League

*Hosted by:*

*Forest Lake Education Center*

February 27-April 30  
for players in grades 2-8



1275 Learning Loop  
Longwood, FL 32779  
407-862-7688

## League Information

### Important Dates:

February 27	4:45-5:45	Registration/Tryouts: 2nd-3rd
February 28	4:45-5:45	Registration/Tryouts: 4th-5th
March 1	4:45-5:45	Registration/Tryouts: 6th-8th
March 6-10		Spring Break
March 13		Late Registration Closes
March 14-April 24		*Regular Season Games
April 25 & 27		*Playoffs
April 30		Championship Sunday

**League Registration fee: \$95**

**Late registration after March 2: \$100**

**SPACE IS LIMITED. THERE WILL ONLY BE 6 TEAMS IN EACH AGE GROUP.**

\*Regular Season games/playoffs will be played on Tuesdays & Thursdays with the exception of Monday, April 24.

\*Regular Season games/playoffs will be 4:45 and 5:45

\*Rain-out games will be played on the following Monday.

\*Game schedule will be posted on **myflec.com** on Friday, March 3. Click on the "Athletics" link and then the "FCSL" link.

Team sports help teach children commitment and responsibility. Generally, every team will play at least one game each week (weather permitted). Attendance is necessary for players to learn skills and become conditioned. Coaches may, at their discretion, gauge playing time based upon attendance.

### Player Conduct Code:

-Obey Rules of the Game

-Show referees, coaches, and opposing players respect

-Show good sportsmanship in both victory and defeat

Any player who does not conduct themselves in a manner in which the referees or League Director deems appropriate will be dismissed from the league.

Player Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Player Information

Player Name: \_\_\_\_\_

Grade Level: 2<sup>nd</sup>-3<sup>rd</sup> 4<sup>th</sup>-5<sup>th</sup> 6<sup>th</sup>-8<sup>th</sup>

School: \_\_\_\_\_

Shirt Size: YS YM YL AS AM AL AXL

Guardian Name: \_\_\_\_\_

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

Emergency Contact Primary: \_\_\_\_\_

Emergency Contact Secondary: \_\_\_\_\_

I would like to be involved in the following ways:

Coach / Assistant Coach

Concession Stand

Team Sponsor—\$300 (Company/Family Name on team jersey)

Sponsor Name for Jersey: \_\_\_\_\_

I/We the undersigned, shall not hold FC SL, FLEC or any of it's coaches, board members, or staff responsible for any injury incurred by the registered player, during practices or games, including any voluntary transportation for said player to or from practices or games. For any injury occurred, participants will use their school's and/or personal health insurance. We hereby agree that FLEC or FC SL, it's members, coaches, and officers shall not be liable for any injury or loss that my child may sustain while participating in activities of any kind, whether sponsored by or under the supervision of FLEC and FC SL and we agree to indemnify and hold harmless FC SL, its members, coaches, officers and designates of any claim whatsoever.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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