



# JACKSON FURY SOCCER CLUB

6303 Sandava Avenue NW, Canton, OH 44718

(330) 966-8318

Web Site: [www.jacksonfury.com](http://www.jacksonfury.com)

E-mail: [tstrock@jacksonfury.com](mailto:tstrock@jacksonfury.com)

*Promoting Competitive Youth Soccer in Jackson Twp and Surrounding Communities*

## Spring Soccer Registration Instructions

**ALL** players/parents must complete or provide the following items:

1. Jackson Fury Indoor Soccer Registration Form with Fee Deposit:

Fee Deposit:

Non-refundable registration deposit	\$ 100.00
Uniform Fee for New Players (\$70.00)	_____
Late Registration Fee (See Below)	_____
Total Deposit	_____

**NEW** players/parents must complete or provide the following items:

(New players are ALL those who did not play with Jackson Fury in Fall 2011 or more recent.)

2. Jackson Fury Registration and Conduct Commitment
3. US Club Soccer Membership Form
4. Ohio Youth Soccer Association North Membership Form
5. Two small school pictures for player passes
6. Copy of a certified health department birth certificate
7. Visit Soccer One for a Uniform Fitting. You may note the correct uniform size on the Jackson Fury registration form or email it to [tstrock@jacksonfury.com](mailto:tstrock@jacksonfury.com). Uniform sizes are due Feb 18, 2012.

Late Registration Fees – Must be paid with the registration deposit:

No Late Fee On or Before Feb 4, 2012.

\$ 10.00 Late Fee Applies Feb 5 to Feb 25, 2012.

\$ 25.00 Late Fee After Feb 25, 2012.

After February 4, 2012 placement on a team is **NOT guaranteed**. Late registrations should be mailed to the above address and will be accepted for open roster spots only. Registration materials and deposits will be returned or destroyed if the team roster is full.

**INCOMPLETE REGISTRATIONS CANNOT BE ACCEPTED!  
PLEASE VERIFY ALL REQUIREMENTS ARE COMPLETED!**

Returned Check Fee: \$ 25.00



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## 2012 Spring Soccer Registration

NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ MOTHER'S NAME \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**New Players Only! Circle uniform size:** Jersey: YS YM YL YXL AS AM AL  
Visit Soccer One for fitting! Short: YS YM YL YXL WS WM WL  
Add \$70 for Uniform Fee! Socks: XS S M L

**DEPOSIT:** A check payable to Jackson Fury Soccer Club must accompany this form with any applicable uniform and late registration fees. Registrations received without correct payment will be discarded. The deposit is non-refundable unless a player cannot be placed on a team. A final payment will be due in April 2012 with the amount due dependent upon final team assignment, league and coaching expenses, and tournament selections. Please refer to the registration instructions for deposit amounts and late fees.

**AFFILIATION:** By registering with Jackson Fury Soccer Club, all players will be registered with US Club Soccer. Players may be registered with only ONE US Club Soccer member. Parents must write any current or previous competitive or premier club affiliations for the past year on the back of this form. If you have any questions, please contact a Jackson Fury club officer. A \$ 50.00 administrative fee will apply to all mid-year APSL/US Club transfers unless waived for special circumstances.

**WAIVER OF LIABILITY:** I hereby, for MYSELF and/or for my child/ward, our heirs, executors, administrators and personal representatives, discharge, waive, and release Jackson Fury Soccer Club, Jackson Township Parks Department, SportDome, Cleveland Alliance Soccer Association, Greater Akron Amateur Soccer Association, US Club Soccer, US Youth Soccer, Ohio Youth Soccer Association North, and its coaches, managers, officers, employees, and the owners of the facilities and parks in which injury or damage to myself or my child/ward may have occurred by virtue of participation in activities of the Jackson Fury Soccer Club. By executing this document, I hereby acknowledge that soccer is a dangerous sport in which serious injury and/or death may be a possible outcome of participation or attendance, and I hereby assume, and/or assume on behalf of my child/ward, all risk of injury or loss to which I and/or my child/ward may be exposed. I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THIS RELEASE OF LIABILITY WAIVER FORM AND SIGN IT WILLINGLY.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_