



**2015/16**

# Youth Indoor Soccer League

Team Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Cell: \_\_\_\_\_ Work: \_\_\_\_\_ Home: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Team Name: \_\_\_\_\_

Coach 1: Email \_\_\_\_\_ Cell: \_\_\_\_\_

Coach 2: Email \_\_\_\_\_ Cell: \_\_\_\_\_

Team Level:     Tournament     Competitive     Recreational     Novice

EVENT	DATES	GRADE					
Boys SOCCER (\$1600)	Saturdays Dec 5 - Mar 5	<input type="checkbox"/> U8	<input type="checkbox"/> U9	<input type="checkbox"/> U10	<input type="checkbox"/> U11	<input type="checkbox"/> U12	<input type="checkbox"/> U13/14
Girls SOCCER (\$1600)	Saturdays Dec 5 - Mar 5		<input type="checkbox"/> U10	<input type="checkbox"/> U11	<input type="checkbox"/> U12		

U13/14: Full Field 6 v 6

U12 & U11: Half Field 6 v 6

U10, U9, U8: 1/3 Field 5 v 5

## REGISTRATION DEADLINE: NOV 13, 2015

10 week regular season. Week 11 is Championship Weekend. Top 2 teams in each division will play.

**\*\*No leagues on: Dec 26, Jan 2, Feb 13**

\*\*Future Stars reserves the right to combine grades to complete divisions. Divisions must have even number of teams. Grade level and team strength will be discussed with coaches and FS organizer

\$500 deposit due upon registration. Payment in full after Nov 13, 2015. Full payment due Nov 26, 2015. Teams with an outstanding balance will not be permitted to play until paid in full. There are no refunds for cancellations made within 4 weeks of the start date unless Future Stars Southampton is able to fill the spot.

Charge to my credit card:     MasterCard     Visa     American Express

Name: \_\_\_\_\_ Card #: \_\_\_\_\_

Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sec. Code: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Enclosed is a check (payable to **Future Stars Southampton**)

Please bring, mail, email or fax this form with your deposit to

**Future Stars Southampton**  
P.O. Box 1576  
Southampton NY 11969  
P: 631. 287. 6707  
F: 631.287.8633

Email: [info@futurestarsouthampton.com](mailto:info@futurestarsouthampton.com)

### Waiver & Release

The registrant is physically cleared to participate in this program and does so at his/her own risk. I understand that neither Future Stars Southampton LLC, SYS Inc. and the Town of Southampton, nor it's agents will assume responsibility for accidents and/or medical expenses incurred at Future Stars Southampton. In the event of an emergency, I hereby grant Future Stars Southampton permission to give whatever immediate treatment is necessary and /or take my self/child to a hospital emergency room. Permission is hereby granted to utilize photos and videos taken at Future Stars Southampton as promotional material. I have carefully read all of the information and agree to all conditions.

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