

**BCYSA**  
Boone County Youth Soccer Association  
**\*\*\*LATE Spring 2012 Registration Form for U8-U14\*\*\***  
Late Registrations are due by Jan. 7, 2012

**Registration Instructions**

Note: Do not use this form for Under 6 registration. Players born after July 31, 2005 should use the Under 6 registration form. A U6 registration form can be obtained from our website at: [www.bcysa.info](http://www.bcysa.info). **Late registrations are due by Jan. 7, 2012.** The cost for late registrations is \$75. For any registration questions please email [brianjanson@hotmail.com](mailto:brianjanson@hotmail.com). For any other questions please contact Adele Nichols at: 859-525-1070. Please fill out this form completely and return it to the address listed on the bottom of this form. Make sure to include a check made out to the BCYSA for **\$75** for each player (referee fees will be collected by each coach at the start of the season). The BCYSA will charge \$25 for any returned check. First time players must include a copy of their birth certificate to verify their age.

**Player Placement**

Since this is Late Registration all registrations at this point are accepted on a first come first serve basis and there is **no** guarantee of placement on a particular team or any team at all. If the child cannot be placed on any team, the check will be returned. The league will **not refund** registration fees for any other reason. Registrations will not be accepted over the phone or through the internet. Please note that in recreational soccer coaches have no control on who is placed on their teams. **\*\*\*Please mail the completed Late Registration form to 120 Patty Ln., Florence, Ky., 41042 and include \$75 for each player do not give them to the schools or coaches\*\*\***

**Player Information**

Player Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: M F

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

Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Mother/Father

Guardian Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

What school does the child attend? \_\_\_\_\_ Today's date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Did the child play in the BCYSA during the Fall 2011? Yes No Age group played: U6 U8 U10 U12 U14

If child played Fall 2011 who was the coach? \_\_\_\_\_ If available at this time play for same coach? Yes No

Does the child wish to play in an older age group? Yes No Is the child playing select soccer too? Yes No

Additional

Comments: \_\_\_\_\_

**Volunteer Coaching Information**

Coaching is determined by the needs of the league/Background checks may be performed

Do you wish to volunteer to Head Coach? Yes No Age group: U8 U10 U12 U14

Coach's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Which type of team to coach if available: Boone Cnty St. Paul IHM MQH

**Mail this completed Late Registration form with a check for \$75 per player payable to BCYSA**  
**Mail to: Adele Nichols (Attn: BCYSA Registrar) 120 Patty Ln., Florence, Ky., 41042**  
**All Late Registrations are due by Jan. 7, 2012**

Family Discount: A family of 3 registered players, \$5 off per player. A family with 4 registered players, the 4<sup>th</sup> player is free.

