

Orion/Oxford Soccer League
Affiliated with MSYSA



SOCCER REGISTRATION

Season dates: August 28 - October 23, 2010
(No Games Labor Day Weekend)

\$75.00 per player (\$180.00 maximum per family if on time)
\$30.00 Non-refundable late fee/per player after 7/2/2010
NO Registrations Will Be Accepted After 8/26/10

DATE: Saturday, June 12, 2010
TIME: 9:00 a.m. - 12:00 p.m.
LOCATION: FRIENDSHIP PARK BASEBALL PICNIC PAVILION
(Small Shelter by Baseball Fields)

ATTENTION U-14 TEAMS – This division plays some games outside of our community (Clarkston, Rochester, Macomb and Utica). Playing requires the purchase of a uniform (cost \$40). Uniforms will be handled by the league for this group only. These uniforms are not available for purchase anywhere else. If you are new to U14, please contact Dolores Gekiere (oosoccer@aol.com).

IF YOU ARE INTERESTED IN COACHING
PLEASE INDICATE ON THE REGISTRATION FORM

Uniforms are available for sale at Tool Sport and Sign - 1060 S. Lapeer Road

Prices are as follows: Complete package price ~ \$30.00

Individual items ~ Jersey - \$19.00 ~ Shorts - \$9.00 ~ Socks - \$3.50

Shin guards must be worn under socks, Soccer shoes are recommended, but not mandatory

No Baseball Cleats! No Jewelry (earrings, watches, rings, necklaces)

Each player is required to have a soccer ball

U-4,U-5,U-6,U-7,U-8 #3 ~ U-10 & U-12 #4 ~ U-14 #5

Mail-In Registration:

Must be postmarked no later than July 2, 2010

(After July 2, —\$30.00 Non-refundable late fee / per player assessed)

Late registrations are not guaranteed placement

Mail completed registration form and payment to:

Orion/Oxford Soccer League (OOSL)

P.O. Box 263

Lake Orion, MI 48361

OOSL will only accept registrations via U.S. mail after July 2, 2010

For registration form online: oosoccer.org

For information contact: Nancy Denton - registrar@oosoccer.org

Orion/Oxford Soccer League

Registration information

Any child born between August 1, 1996, and July 31, 2007, is eligible and encouraged to play soccer in the Orion/Oxford Soccer League's Fall 2010 season. All players are expected to play in their perspective age group.

NO EXCEPTIONS!

The Fall 2010 player fee is **\$75.00 per player** (\$180.00 maximum per family when received prior to July 2). Fees will not be refunded after the season begins unless your child cannot be placed on a team, is unable to play for medical reasons (a doctor's excuse is needed) or the family has moved from the Orion/Oxford area. A \$30.00 handling fee will be charged for **all** refunds. Notification in writing is required for a refund prior to **August 28, 2010**. Write to: P.O. Box 263, Lake Orion, MI 48361 or email to registrar@ooslsoccer.org

Mail-in registrations will be considered late if they are postmarked after July 2, 2010. A \$30.00 non-refundable late fee per player will be assessed to each child's registration received after July 2, 2010. Season dates are as follows: **Aug. 28,- October 23 2010**. Games are *usually* scheduled on Saturday. There may be weeknight games for U14 and any division with an odd number of teams. **Late registrations are not guaranteed placement or special requests.**

Please bring/mail the completed registration form with your payment. If you are a **NEW PLAYER TO THE OOSL**, you will also need to bring/mail a copy of your BIRTH CERTIFICATE. All players are insured through Michigan State Youth Soccer Assoc. (MSYSA). Any Questions, contact Registrar Nancy Denton - via email at registrar@ooslsoccer.org.

Please cut off and send entire lower portion

U-4C	8-1-06	7-31-07
U-5C	8-1-05	7-31-06
U-6	8-1-04	7-31-05
U-7	8-1-03	7-31-04
U-8	8-1-02	7-31-03
U-10	8-1-00	7-31-02
U-12	8-1-98	7-31-00
U-14	8-1-96	7-31-98
*U4 & U5 are coed		

Circle **one** that birthday falls

Orion/Oxford Soccer League Registration Form FALL 2010

For registration form on line:
ooslsoccer.org

Please Print Player Information

Name : _____ **Date:** _____

Address: _____

_____ Street _____ City _____ Zip _____

Phone: _____ **Township:** OR OK OX BR IN AD Other _____

Circle One:

Birthdate: _____ **Age:** _____ **School:** _____

Sex: Male Female

Type of Team: Coed Girls (U4 & U5 Coed only)

IS THERE ANY ONE NIGHT THAT YOUR CHILD CANNOT PRACTICE ON? _____

This is not Guaranteed

HAVE YOU PLAYED IN OOSL BEFORE?

Yes No Where? _____

HAVE YOU EVER PLAYED SOCCER BEFORE?

Yes No Where? _____

Are you aware of any physical or mental disability which would endanger your child or impair his/her ability to play soccer? Yes No

If Yes, please explain: _____

PARENTAL INVOLVEMENT: Coach Assistant Coach Board Member One Time Project

E-mail Address _____

(e-mail address is required on late registration for notification)

We understand that our child will be assigned to a team according to league rules. We agree not to hold the league or its officials responsible for accidents or injuries.

Parent Names: _____

Parent Signature—Required _____

Donation * _____ (any donation of \$15.00 or more will receive a local vendor discount card and window decal)

-For Office Use Only-

Date Rec'd _____ Amt. Paid:\$ _____ Cash _____ Check# _____ Initials _____