



PLAYER AND PARENT CONTRACT

PLAYER NAME _____

AGE GROUP _____

Congratulations on being selected to join CITRUS UNITED SOCCER CLUB (hereinafter "CUSC") for the 2020-2021 Seasonal Year! Your skills and hard work have earned you a spot in one of the elite soccer clubs in the United States. Our coaches and Board of Directors hope that this will be an enjoyable year for you and your family. As part of the registration process, we want to ensure that you are fully aware and understand the commitments CUSC makes to you, and what our expectations and obligations are from you as a result of you accepting the position offered to you. Please initial the points below acknowledging your understanding of the mutual expectations between you and CUSC, then sign and date below, we will obey all club rules

Player's initials

Parent's initials

It is our intent to honor the commitment to play with CUSC for the entire seasonal year and we understand that accepting the position offered and completing the registration documents obligates me to pay the full registration fee. The registration fee for the 2020-2021 season is **\$265.00**. We may choose to make one payment for the full amount or **two** payments of \$150.00. Which includes a finance fee of **35**. We agree to make all payment installments toward fulfilling our financial obligation unless we apply to the Board of Directors (VP of Competitive) and receive written approval for a modified payment structure.[no refunds after received]

Payment deadlines are as follows: ALL FEES ARE NON-REFUNDABLE:

- * Full payment of **\$265.00** is due at acceptance to team following tryouts; or
- * **Two** payments of \$150.00 as follows:
 - 1st payment of \$150.00 is due at acceptance to team following tryouts
 - 2nd payment of \$150.00 is due on or before Aug. 3rd.

No player pass will be issued until payment is received in full

Senior season (U15 and older) starts on August 10th).

Player's initials

Parent's initials



I understand that we will be responsible to purchase a uniform package consisting of: 2 PAIR OF SHORTS, 2 JERSEYS, 2 PAIR OF SOCKS, 1 BAG.

Player's initials

Parent's initials

We understand that since this is a premier competitive environment, there is NO guarantee of minimum playing time. We also understand and agree to abide by the CUSC policy of not allowing players to guest play with other teams, or members of other teams to guest play with CUSC teams, except with the express written approval of the Board of Directors and coach. These exceptions will only be granted if all player fee and financial obligations have been fulfilled,

Player's initials

Parent's initials

Additionally, we understand that we will share in team expenses above and beyond those covered by the registration fees noted above. These additional expenses may be for tournaments or team trainers beyond those covered by registration fees. The team may seek and receive donations or participate in fund-raisers to defray these expenses. I understand that all funds collected from fund raisers or donations, will be credited to my child's team account to be used for such expenses. These funds remain with CUSC should the player decide to leave the club.

Player's initials

Parent's initials

Should the player wish to be released, other than for a season ending injury or a move out of state, to transfer to another club prior to the end of the seasonal year, the player/parents will be required to pay a \$300.00 transfer/release fee to CUSC, in addition to fulfilling all financial obligations noted above before the Change of Status is processed.

Player's initials

Parent's initials

We understand that failure to fulfill our financial obligations to CUSC may result in the player being placed as "Not in Good Standing" with CUSC and FYSA, which will result in that player's playing privileges being suspended until all such financial obligations are fulfilled. This will also impact the player's ability to register with CUSC or any other affiliate the following season.

Player's initials

Parent's initials

Citrus United Soccer Club

We have received and have read the FYSA Code of Ethics as printed below, and agree to abide by the requirements set forth therein. We will act in a manner of respect at all practices, games, travel, etc., and serve as role models to others to maintain the integrity of ourselves, our team, and all of CUSC, FYSA, USYSA, USSF, and FIFA rules at all times, or will be subject to disciplinary action.

Player's initials

Parent's initials

FYSA CODE OF ETHICS

PLAYERS

- I will encourage good sportsmanship from fellow players, coaches, officials and parents at all times.
- I will always remember that soccer is an opportunity to learn and have fun.
- I deserve to play in an environment that is free of drugs, tobacco, and alcohol, and expect everyone to refrain from their use at all soccer training and games.
- I will do the best I can each day, remembering that all players have talents and weaknesses the same as I do.
- I will treat my coaches, other players and coaches, game officials, other administrators, and fans with respect at all times, regardless of race, sex, creed or abilities, and I will expect to be treated accordingly.
- I will concentrate on playing soccer; always giving my best effort.
- I will play by the rules at all times.
- I will, at all times, control my temper, resisting the temptation to retaliate.
- My conduct during competition towards play of the game and all officials shall be in accordance with appropriate behavior, and in accordance with FIFA's Laws of The Game, and in adherence to FYSA rules.
- While traveling, I will conduct myself so as to be a credit to myself and my team.
- A player cannot be cut from a team after he/she is registered to that team, unless he/she exhibited conduct requiring dismissal, without prior consent from the Board of Directors. If requested by the player and and/or parent, a hearing must be held for any involuntary player release.
- Alcohol, illegal drugs, tobacco products, and unauthorized prescription drugs shall not be possessed, consumed or distributed before, during, or after any game, or at any time at the field and/or game complex.

PARENTS/SPECTATORS

- I will encourage good sportsmanship by demonstrating positive support for all players, coaches, game officials, and administrators at all times.
- I will place the emotional and physical well being of all players ahead of my personal desire to win.

Citrus United Soccer Club

- I will support the coaches, officials, and administrators working with my child in order to encourage a positive and enjoyable experience for all.
- I will remember that the game is for the players, not for the adults.
- I will ask my child to treat other players, coaches, game officials, administrators, and fans with respect.
- I will always be positive.
- I will always allow the coach to be the only coach, by refraining from coaching from the sidelines.
- I will not enter into arguments with team's parents, players, or coaches.
- I will not enter the field of play for any reason during the game.
- I will not criticize game officials.
- Alcohol, illegal drugs, tobacco products, and unauthorized prescription drugs shall not be possessed, consumed, or distributed before, during, after the game, or at any time at the field and/or game complex.

Failure to comply may result in the suspension of your privilege to participate in FYSA sanctioned events for the following periods:

- 1st Offense: Suspension for a minimum of thirty (30) days to a maximum of (5) years;
- 2nd Offense: Suspension for a minimum of one (1) year to a maximum of ten (10) years;
- 3rd Offense: Suspension for a minimum of five (5) years to a maximum of fifty (50) years.



FYSA ACKNOWLEDGMENT OF REGISTRATION

INSURANCE NOTICE: All injuries must be reported within 90 days of the injury. Benefits satisfied.

INFORMED CONSENT: I, the undersigned parent/guardian of the registrant, agree to adhere by the rules of CUSC, the state association (FYSA), and all its affiliated organizations. My/our child wishes to participate in soccer during the season of this registration. I/we realize risks are involved in my/our child's participation. I/we understand that the risk to my/our child includes a full range of injuries from minor to severe, and the result could be death, paralysis, or other serious, permanent disability. I/we accept this risk as a condition of my child's participation.

In the designated (gray) area, please print and sign your names, then date where indicated.

		, 2020
Player Name (Print)	Player Signature	Date
		, 2020
Parent Name (Print)	Parent Signature	Date
		, 2020
Club Representative	Team Coach	Date