



www.the422sportsplex.com • 1400 Industrial Hwy • Pottstown, PA 19464 • 610.323.9600

Youth Soccer Registration

U10, U12, U-14, U-16, JV & Varsity

Session Dates: _____ (see website.)

League Information

Please read the following information carefully. This is an application. You will be notified if your team is accepted into our league. All teams are responsible for knowing all policies of The 422 SportsPlex--there are no exceptions. Teams will play 7 games. All games will be played on Saturdays and Sundays. No games will be rescheduled. U10 play 6 a side plus a goalie. All other age groups will play 5 a side plus a goalie. If make-up games are necessary, games may be scheduled during the week or after regular season play is over.

Payment Information

The cost is \$795 per team. Return this form along with \$100 non-refundable deposit to register. All players must submit proof of age. All players are responsible for knowing the house rules. Please check out the website for a copy. Acceptable forms of payment are check, cash, Visa or MasterCard.

Team Information

In order to ensure parity in the leagues, please fill out ALL the information below. Teams will be placed into divisions by The 422 SportsPlex based upon the information given. **Any false information can lead to your team forfeiting the season and/or removal from the league.** The 422 SportsPlex reserves the right to place teams in any division they choose. Teams will not be allowed to move out of the divisions in which they are placed. There are no refunds and no games will be rescheduled in season. **Please read our rules carefully about rescheduling.** Use one form per team. The SportsPlex is not responsible for forfeits. All teams are responsible for knowing the house rules. Please check out the website for our rules.

Incomplete applications will not be accepted into the league.

Club/Team Name _____ **Age Group** (circle one): U10 U12 U14 U16 JV Varsity

League Type (circle one): Female Male **Skill Level** (circle one): Premier Classic Recreation

Actual Age Group (circle one): U-8, U-9, U-10, U-11, U-12, U-13, U-14, U-15, U-16, U-17, U-18, U-19

Outdoor league last completed _____ Age group _____ Division _____ Placed _____ Record _____

Outdoor league currently playing _____ Age group _____ Division _____ Placed _____ Record _____

Desired Age Group (circle one): U10 U12 U14 U16 JV Varsity

All bye requests MUST be submitted via email to the422sportsplex@yahoo.com. Please check our website to insure receipt.

Manager/Coach Information

Manager's Name _____ Manager's Home Phone _____

Manager's Address _____ Manager's Work Phone _____

_____ Manager's Cell Phone _____

Manager's Email _____

Coach's Name _____ Coach's Email _____

Coach's Home Number _____ Coach's Cell Phone _____

Refund Policy: If the league you request is filled, we will return your payment. If games are cancelled due to inclement weather or any other unforeseeable circumstance, we will attempt to reschedule play at a later date. However we cannot guarantee that cancelled games will be rescheduled. There are no refunds.

For Office Use Only	Received By _____	Date Received _____	<input type="checkbox"/> Roster	<input type="checkbox"/> Waiver	<input type="checkbox"/> Proof of Age	<input type="checkbox"/> Full Payment
<input type="checkbox"/> Cash	<input type="checkbox"/> Check (# _____)	<input type="checkbox"/> Charge (circle)	MasterCard	Visa		
Credit Card # _____	Exp _____	Code _____	Amount _____			