



# Instructions for SPRING 2010 REGISTRATION Cherry Hill FC

<http://www.cherryhillfcsoccer.com>

**Please Register On-Line at <http://www.cherryhillfcsoccer.com>!**

**Paper-based registration is only for people who cannot register on-line!**

***There will be one Recreation "Silent **Fan Day**" during the season!***

If using the form below, please follow these instructions in completing and submitting your child's registration form for the upcoming soccer season. A separate form is required for each child.

1. Indicate which League you would like to play in by checking either **Recreation** or **Travel**. We have Recreation teams for all children from 3 to 18 years old. Tryouts for Travel teams are held in April and May for the Fall-Spring (academic) playing year. Please see the web site for details.
2. **Circle the age of your child on July 31, 2009.** August 1st is the state's cut-off date for each age group. **Note on playing "grade" vs. "age" appropriate:** Since the cut off for school is generally October 1st, children born in August or September are allowed to play "up", which we call "grade appropriate", except for U4 and U5 Recreation and U8 Travel. If you want this for a child born in August or September, please circle their real age, but then circle "grade appropriate" near the very bottom of the form. Normally, we add one year to this number to determine what U-level the child plays at, e.g., a 5 year old will play U-6, meaning he was Under-6 on July 31 -- this is considered **age appropriate**. Alternatively, a child born in August or September who wants to play **grade appropriate**, and is 5 on July 31, will play U-7 (with children who were Under-7 at the cut off date).
3. Please indicate if the child is a player returning to us from Cherry Hill FC, whether your address or phone number has changed, and, if a returning player, the last season played with us.
4. Complete the middle portion of the form with names, date of birth, circle the player's gender, and write in the email address, postal address, phone number and parent's names. We know you are probably in a hurry, but please take a little time to write legibly; every season we have someone show up after several weeks of play claiming they never heard from a coach, and all too often the names, addresses and phone numbers were impossible to read!
5. For our Recreation program, we gladly TRY to honor requests to stay with a coach, to be with a friend, or with children from a neighborhood or school. ***Sometimes we can't, but we really do try. However, we also place a high value on keeping teams fair and will not honor requests that lead to unbalanced teams.*** Please let us know what your preferences are on the line for "Last Season's Coach or Other Request". If you don't tell us, we can't read your mind or try to help.
6. In general we assign Recreation teams by neighborhood and school so children are playing with their friends and so practices can be held at a neighborhood field if convenient for the coach. Please tell us your child's neighborhood and school. If you live in one of Cherry Hill's smaller neighborhoods, you should feel free to indicate the one you would like to be grouped with.
7. ***We are always looking for caring adults to coach. Learning with your child can be fun!*** No previous soccer or coaching experience is required, but you have to be willing to devote some time and energy to learn how and do a good job. We offer many different clinics and classes for new coaches, including ones for licenses and certifications. Please volunteer! ***We also need volunteers to help run our corporation and take care of our facilities, so please tell us your special skills.***
8. Read and sign the medical release and policy acceptance agreement.
9. **Payment:** Under-7/8 and younger players are \$80. Recreation Under-9 and older players are \$90 each season. Travel - Two Season (Fall & Spring) is \$250; Spring-Season Only players are \$200 for MAPS/JAGS & \$150 for SJSJL/SJGSL. Please pay for only the two most expensive children in a family in Cherry Hill FC on a seasonal basis. If it is after 1/31/10, add a \$10 late fee for each player who has played with our club before. After 2/14/10, add a \$25 late fee for each player.
10. Please make all checks payable to Cherry Hill FC (you can write one check for multiple children) and mail to 4 Lamp Post Ln, Cherry Hill, NJ 08003.

# SPRING 2010 REGISTRATION

## Cherry Hill FC

<http://www.cherryhillfcsoccer.com>

4 Lamp Post Lane, Cherry Hill, NJ 08003

**Season starts in March Late fees for all returning players: \$10 after 1/31, \$25 after 2/14.**

League: Recreation ( ) (All ages) Player returning from our Club: Yes ( ) No ( )  
Travel ( ) (U-8 and Up, Tryout required) New Address: Yes ( ) No ( )  
Age on **July 31, 2009**: 3 4 5 6 7 8 9 10 New Phone Number: Yes ( ) No ( )  
11 12 13 14 15 16 17 18 Last Season Played: \_\_\_\_\_

PLEASE PRINT:

Last Name (Family Name): \_\_\_\_\_ Child's First Name \_\_\_\_\_

Birth Date (MM/DD/YY): \_\_\_\_\_ Male or Female \_\_\_\_\_ Email Address: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Last Season's Coach or Other Request: \_\_\_\_\_

**RECREATION ONLY:** Neighborhood \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

### PARENTS: COACHES ARE NEEDED

Please volunteer to coach! If you don't know how, we will teach you. Previous soccer or coaching experience is not required!

The MOTHER ( ) FATHER ( ), volunteers to: COACH ( ) ASSISTANT COACH ( ).  
He or She HAS ( ) DOES NOT HAVE ( ) WOULD LIKE ( ) an F Coaching License.

Or, I am good at \_\_\_\_\_ and would like to help.

I certify that my child is in excellent health and may participate in strenuous physical activities, including soccer. I recognize that soccer is a contact sport and injuries are possible. I agree to hold Cherry Hill FC, any of its subsidiary organizations, its officers, agents, coaches, employees, contractors and volunteers harmless from any and all claims of injuries sustained by my child during his or her participation in soccer association programs. I agree to execute an appropriate medical release. **I understand that player placement on teams is at the discretion of the association. I understand that requests may not be honored.** I have verified that all information on this form is correct and accurate, and that I have read and understood the preceding statements. Refunds are at the discretion of Cherry Hill FC, and a \$30 processing fee will be assessed to all refunds.

Parent or Guardian **X** \_\_\_\_\_ Date: \_\_\_\_\_

#### PLEASE DO NOT COMPLETE BELOW THIS LINE -- OFFICIAL USE ONLY

PLEASE MAKE CHECKS PAYABLE TO: **Cherry Hill FC** Pay only for the most expensive two children in a family.  
Recreation: Under-8 and younger: \$80; U9 and older: \$90 each season; Travel: \$250 for Fall & Spring; \$200 for High School  
Spring Only teams in MAPS/JAGS, \$150 for High School Spring Only in SJSL/SJGSL;

**LATE FEE \$10 after 1/31; \$25 after 2/14.**

TOTAL PLAYERS IN FAMILY: ( ) For August/September birth dates circle either: Age or Grade Appropriate

Check / Cash Check / Receipt Number \_\_\_\_\_ Amount Paid \_\_\_\_\_ Club Official \_\_\_\_\_

**Recreation: Coed: U 4 5 6 Boys: U 7-8 9-10 11-14 15-18/High School Girls: U 7-8 9-10 11-14**  
**Travel: Boys: U 8 9 10 11 12 13 14 15 16 17 18 19 Girls: U 8 9 10 11 12 13 14 15 16 17 18 19**