

# Youth Soccer League

Spring 2015

Presenting Sponsor:



**BOYS & GIRLS  
GRADES Pre-K—8th**



**Early Registration:** December 15—January 28th  
**After January 28th:** \$10.00 late fee will be applied  
**FINAL Deadline: February 6th**

See the back side of this form to register today!

- The league is organized by grade level with more challenging play available as the player grows and progresses.
- Our goal is to provide the opportunity for players and parents to learn the game of soccer and have fun!
- Emphasis is placed on skills development, learning the rules of the game, sportsmanship and teamwork.

For more information about the league, contact Tessa Bollinger at (573) 339-6736 or [tbollinger@cityofcape.org](mailto:tbollinger@cityofcape.org). Please make checks payable to "City of Cape Girardeau" and mail to:  
**Cape Girardeau Parks and Recreation Department**

410 Kiwanis Dr.

Cape Girardeau, MO 63701



**CITY of CAPE GIRARDEAU**  
PARKS & RECREATION DEPARTMENT

573-339-6340

[www.cityofcapegirardeau.org/soccer](http://www.cityofcapegirardeau.org/soccer)  
[tbollinger@cityofcape.org](mailto:tbollinger@cityofcape.org)



**Age:** Pre-K through 8th grade (must be 4 years of age by March 1st)  
Games: Pre-Kindergarten plays 5 total games on Saturday mornings (Tentative dates: March 7, 14, 21, 28, & April 4)  
K-8 plays 8 total games on Tuesdays, Wednesdays, and Thursdays evenings, as well as on Saturday mornings over a 5-6 week season

**Registration:** Early Registration Period: December 15th– January 28th  
\*\$10.00 late fee applied after January 28th  
Late fee and FINAL Deadline Period: February 6th

**Important Dates:** Coaches' Meeting/Draft (1st/2nd Grade Boys and Girls, 3rd/4th Grade Boys and Girls, 5th/6th Grade Coed and 7th/8th Grade Coed divisions will draft): **Thursday, February 12th at 6:00 PM** at the Osage Centre

**Tentative start date: March 3rd**

**Entry Fee:** Pre - Kindergarten \$25.00 and Kindergarten - 8th \$40.00

\*Players return their jersey after the fall season; they keep their jersey after the spring season.

**Players Form**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Primary Number: \_\_\_\_\_ Secondary Number: \_\_\_\_\_  
Do you receive text messages? (please circle)    yes    no    Texting Number: \_\_\_\_\_  
E-Mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender:    Male    Female  
Shirt Size (circle one):    YS (5-8)    YM (10-12)    YL (14-16)    AS    AM    AL    AXL  
Grade (circle one):    Pre-K    Kindergarten    1st    2nd    3rd    4th    5th    6th    7th    8th  
Parents Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_

**Coaches Form**

Name: \_\_\_\_\_ Player's Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
Cell: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Coaching (circle one):    Head    Assistant    Either    Shirt Size (circle one):    AS    AM    AL    AXL    2XL    3XL

**Head Coach**

Do you have an assistant? Circle one:    Yes    No    If yes, please list their name: \_\_\_\_\_  
Social Security #: \_\_\_\_\_    A mandatory background check will be completed on every coach.

**Assistant Coach**

Do you have a head coach? Circle one:    Yes    No    If yes, please list their name: \_\_\_\_\_

Player Ratings: Please rate your child's ability with A being above average, B being average, C being a player that needs more training or a first time player. A \_\_\_ B \_\_\_ C \_\_\_  
Are you interested in being a league sponsor? \_\_\_ Yes \_\_\_ No Business Name & Number: \_\_\_\_\_  
Registration Form & Entry Fee may be mailed or delivered to either of the following:  
• A.C. Brase Arena: 410 Kiwanis Dr. Cape Girardeau, MO 63701: Mon.–Fri. 8:00 AM–5:00 PM  
• Osage Centre: Mon.–Thurs. 5:00AM – 10:00PM, Fri. 5:00AM – 6:00PM, Sat. 9:00AM – 4:00PM, or Sun. 12:00PM-9:00PM