



# South Mobile County Soccer- Bayou La Batre Fall 2023 Registration Form

Ages 3 through 14

Registration Fee for Soccer - \$45.00

Returning player? \_\_\_\_\_

Copy of Insurance Card \_\_\_\_\_

Copy of Birth Certificate \_\_\_\_\_

Copy of Drivers License \_\_\_\_\_

**Payable at City Hall OR online at [www.CityOfBayouLaBatre.com](http://www.CityOfBayouLaBatre.com)**

PAY REGISTRATION FEE TO City Hall or remit online by April 29th-May 15th.

**YOUR CHILD WILL NOT BE REGISTERED WITHOUT MAKING THE PAYMENT AND FILLING OUT THE PAPERWORK. BOTH MUST BE COMPLETED BEFORE TEAM PLACEMENT.**

13785 South Wintzell Avenue ~ Bayou La Batre, AL 36509  
251-824-2171 Monday – Thursday 7 a.m. to 6 p.m.

**ONLY a PARENT or LEGAL GUARDIAN may fill out, and sign this form on behalf of a child.**

Players Name: (First, MI, Last) \_\_\_\_\_

Child prefers to be called \_\_\_\_\_ Age of Child on September 1, 2023 \_\_\_\_\_

Age Now \_\_\_\_\_ Birthday \_\_\_\_\_ Male / Female (Circle One) Previous Team if Returning \_\_\_\_\_

Does this player have any prior soccer experience, if so how many years/season? \_\_\_\_\_

Is player on any other soccer roster outside of SMCS if so where? \_\_\_\_\_

Parent Name: (First, Middle, Last) \_\_\_\_\_

Address: \_\_\_\_\_

Do you live inside Bayou La Batre City limits: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Parent or Legal Guardian (please circle one)

Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

**(Emergency contact should be someone DIFFERENT that the parent listed above)**

**Soccer Jersey ~ Please circle ONE**

**YOUTH ~ X-Small Small Medium Large ~ ~ ~ ADULT ~ Small Medium Large XL XXL**

**Jersey Number ( Pick Two #'s) \_\_\_\_\_**

**SIGN BELOW THAT SIZES ARE CORRECT-ANY SIZE ADJUSTMENTS NEEDED WILL BE AT THE EXPENSE OF THE PARENT OR GUARDIAN**

**Signature verifying sizes are correct** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**\*\*Registration Fees include: Uniform (Jersey and Socks) and End of Season Trophy/Awards\*\***



PLAYER NAME:   PLAYER AGE: _____
--

## South Mobile County Soccer- Bayou La Batre Insurance, Consent for Treatment and Waiver Form

### MANDATORY Insurance Coverage

Beginning June 2 2022, the City of Bayou La Batre requires proof of health insurance for any child playing sports with a City of Bayou La Batre sponsored sports program. **This insurance requirement is mandatory. No exceptions will be made.** The City of Bayou La Batre, its facilities, grounds, associates, officials or any other associated parties will not assume financial or other legal responsibilities for injuries received while participating in special events, practicing, or playing games at Zirlott Park in Bayou La Batre or for the South Mobile County Soccer – Bayou La Batre Program.

Please initial the following statement to verify the understanding of the mandatory health insurance requirement.

\_\_\_\_\_ I understand that my child must be covered by medical insurance in order to play sports with/ under a City of Bayou La Batre sponsored sports program. Along with my child’s insurance coverage, I will be responsible for any and all medical expenses incurred as a result of an injury my child receives as a result of participation in soccer while participating with the South Mobile County Soccer – Bayou La Batre Program. I understand it is my responsibility to notify a board member of the South Mobile County Soccer – Bayou La Batre Program if insurance coverage for my child changes and will provide a copy of the new insurance card/coverage immediately. I understand that if the health insurance information provided shows the coverage date ending during the practice or playing season of this sport, my child will be unable to participate until a new proof of coverage is provided to a representative of the South Mobile County Soccer – Bayou La Batre Program.

### B. Consent For Treatment

\_\_\_\_\_ In the event of an accident and neither I nor my designated emergency contact can be reached in reasonable attempts, I hereby give my consent for emergency transportation to be called if needed and for emergency treatment to be given at the nearest hospital if no preferred hospital is listed below or the preferred hospital is on diversion.

PREFERRED HOSPITAL \_\_\_\_\_

Please list the child’s primary care physician below

Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ I DO NOT give my consent for emergency medical treatment if I can’t be contacted. In the event of a serious injury, I want the Bayou La Batre Football and Cheer Program to:

\_\_\_\_\_  
\_\_\_\_\_

### C. Waiver

In consideration of your accepting this registration, I hereby, for myself, my heirs, executors, and administrator, waive and release and all rights and claims I may have against the City of Bayou La Batre and South Mobile County Soccer – Bayou La Batre Program, for any of their officials for all damages and injuries suffered by me or my participating child while participating in the program.

Parent/ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**2023 Spring Soccer Season**  
**South Mobile County Soccer- Bayou La Batre**  
**Parent/Guardian and Player Code of Conduct**

PLAYER NAME:

PLAYER AGE: \_\_\_\_\_

*One form must be signed for each player who participates in the South Mobile County Soccer- Bayou La Batre.*

**PARENT/ GUARDIAN CODE OF CONDUCT**

- I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice or other youth event associated with the SMCS Soccer BLB program.
- I will place the emotional and physical well-being of my child or other players ahead of any personal desire to win.
- I acknowledge and appreciate players' growth toward maturity, teamwork, and sportsmanship. I will assist in their effort toward establishing stronger relationships with teammates, coaches, and within themselves.
- I will affirm my child and their teammates when good character, healthy sportsmanship, and other positive behaviors and actions are displayed. I will not affirm only their athletic performance or a victory.
- I will serve as a role model for our players, talking politely and acting courteously toward coaches, officials, other parents, visiting team parents, and spectators at practices, games and meetings.
- I will be a model of good sportsmanship. I can show this by acknowledging and applauding the efforts of not only their team members, but their opponents. I can accept defeat graciously by congratulating the members of the opposing team on a game well played.
- I will encourage my child and his teammates with positive statements, even when they make mistakes. At every practice, I understand children are growing physically in their skills, developing character, and emotionally growing by building confidence. At every practice I understand children are learning teamwork and sportsmanship.
- I will treat other players, coaches, officials, and fans with respect and courtesy regardless of race, sex, creed, and abilities. I will ensure my child understands to treat others how you would like to be treated.
- When problems or questions arise, I will bring my concerns to the appropriate people who can make decisions and/or take actions such as a Coach, a South Mobile County Soccer- Bayou La Batre or Zirlott Park Official.
- Because I am a parent with the power and platform to make a positive difference in the life of every player, I commit to this code of conduct. When failing to act or live up to these standards, I will allow for accountability and take responsibility for my actions. I understand that unsportsmanlike and/or unprofessional behavior shown by myself or my child may result in suspension or full dismissal of visitor admission privileges, game and/or practice suspensions, including possibly my child being dismissed from the SMCS BLB Program. I understand that any admission fees, uniform fees, and/or registration fees paid will not be reimbursed if I or my child is dismissed for unbecoming or unsportsmanlike behavior and/or actions.

\_\_\_\_\_  
 Signature \_\_\_\_\_ Date

**PLAYER CODE OF CONDUCT**

- I accept responsibility for my behavior while at practice, at games and during soccer events. I understand that what I do and say affects my teammates, other teams, and other people around me either positively or negatively.
- I will respect the facility that I practice, and play games at. I will not enter areas where I am not permitted to be. I will not cause damage to, nor take property that isn't mine. I will alert an adult if I see property of others being misused, taken or vandalized. I will alert an adult if other people are in areas of Zirlott Park or buildings that they should not be in.
- I will act with respect toward myself, and the people and things around me, including my parents and/or my guardian, my coaches, my teammates, SMCS BLB Soccer staff, my opponents, and the spectators. I will alert an adult if I see someone else being treated unkindly or being bullied.
- I will treat other players, coaches, officials, and fans with respect and courtesy regardless of their differences. I will judge people by their good character and the kindness shown to me.
- I understand I can serve as a role model at all times by talking politely and acting courteously toward coaches, teammates, opponents, officials, and spectators. I understand that it is a privilege to play in the SMCS BLB program, and to represent my family, school, and community as an athlete.
- I will give 100 percent effort to practices, games, and events. I understand that my effort demonstrates my commitment to the team and my respect for my coaches and teammates.
- I will display good sportsmanship. I will acknowledge and applaud the efforts of others. I will encourage my teammates with positive statements. I can accept defeat graciously by congratulating my opponents on a game well played.

\_\_\_\_\_  
 Signature \_\_\_\_\_ Date

## Parent/Guardian Registration Agreement

I hereby acknowledge that South Mobile County Soccer- Bayou La Batre has provided me with signed copies of the following documents:

**Insurance, Consent for Treatment and Waiver Form**

**Parent Code of Conduct**

**Player Code of Conduct**

**Photography waiver**

I hereby acknowledge that the \$45.00 registration fee covers one uniform (consisting of a jersey and socks) and an end of season trophy/award, and that I as the parent/guardian will be responsible for supplying my player with cleats, black shorts, shin guards and any additional protective gear (mouth guards, goalie gloves, etc...)

I \_\_\_\_\_ GIVE permission for SMCS to photograph my child while at the park to be used for promotion and recognition of the league.

I \_\_\_\_\_ DO NOT give permission for SMCS to photograph my child while at the park to be used for promotion and recognition of the league.

\_\_\_\_\_  
Signature of Parent/ Guardian

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature of SMCS Board Officer

\_\_\_\_\_  
Printed Name/ Title