



Wainfleet Youth Soccer Registration Information 2022

Registration Deadline March 31, 2022

Mail completed forms to: Wainfleet Youth Soccer, PO Box 27, Wainfleet, ON L0S 1V0 or

E-mail to: registration@wainfleetyouthsoccer.ca

Wainfleet Youth Soccer is accepting registrations for children born in the years 2006– 2017.

WYS runs from mid-May until the beginning of August every Tues. and Thurs. @ 6:30 at the Wainfleet Sports Complex (behind the Arena) Mosquito and Atom Divisions start Tuesday May 17, 2022. Sprite and Squirt Divisions start Thursday May 19, 2022.

Registration Fees

Wainfleet Resident Rate (Individual): \$45.00 + \$20.00 shirt fee = \$65.00
 Wainfleet Resident Rate (Family): \$110.00 + \$20.00 (shirt fee each player)
 E.g. \$110.00 + (4 x \$20.00) = \$190.00
 Non-Resident Rate (Individual): \$70.00 + \$20.00 shirt fee = \$90.00
 Non-Resident Rate (Family) \$180.00 + \$20.00 (shirt fee each player)
 E.g. \$180.00 + (4 x \$20.00) = \$260.00

Sprite:	2016-2017
Squirt:	2013-2015
Atom:	2010-2012
Mosquito:	2006-2009

\$10.00 LATE FEE per child for registrations after March 31, 2022

All NSF Cheques are paid by the registrant and player(s) are held from playing until cleared. No Refunds will be made after May 17, 2022. All refund requests must be made to the Treasurer (treasurer@wainfleetyouthsoccer.ca)

Non-Resident Rates may be reduced to Resident Rate if an adult family member volunteers for the entire season.

Make cheques payable to: Wainfleet Youth Soccer P.O. Box 27 Wainfleet ON L0S 1V0.

Or send by E-transfer to : treasurer@wainfleetyouthsoccer.ca

How are Teams Organized?

Wainfleet Youth Soccer does its best to try to allow all teams to have a fair chance at winning any particular game. Registrants must be aware that this may not always occur. WYS aims to fairly divide the team rosters by age, gender and ability within our four divisions Sprite, Squirt, Atom and Mosquito. There are approximately 5-6 teams per division. To ensure equal and balanced teams, **WYS will not accept requests for player placements.**

Uniforms and Equipment

Cleats required in the Atom and Mosquito Divisions. Running shoes allowed in the Sprite and Squirt Divisions.

WYS provides the players with a team shirt for a fee of \$20. *****Shin guards and socks to cover them are MANDATORY******

Inclement Weather

If it's raining play goes ahead... bring an umbrella!

If there is severe weather (i.e. Lightning) in the area during the afternoon of a soccer day, a decision will be made by **5:00pm** if soccer for that evening is to be abandoned. Coaches will be notified, and they are then asked to advise their own respective players. **Please check the Website and/or Facebook for updates!**

After soccer has started, if lightning is seen it is incumbent on every coach, referee, and member of the executive to clear those fields of kids, immediately. Parents must co-operate and be able to assist children to vehicles immediately. Soccer will be abandoned for the night, and there will be absolutely no exceptions of this. Please note there is no suitable shelter on our fields in case of inclement weather. Do not drop children off without suitable arrangements as WYS Board/Coaches will not be held responsible. If an abandoned game has reached the half time interval, the result stands. Otherwise, the game will be rescheduled.



Wainfleet Youth Soccer (since 1977) - Code of Conduct and Fair Play

The following is our Code of Conduct and Fair Play Code for **Players, Coaches, Referees and Spectators** involved in Wainfleet Youth Soccer. They have been drawn up with the aim of encouraging good sportsmanship among the teams and you are all expected to adhere to them.

1. Wainfleet Youth Soccer is **NOT a babysitting service**. Your child needs you to be there to share in his or her accomplishments as well as to provide support and comfort when things don't go as hoped for. If it is necessary for you to be absent during a game or practice, please make sure that a responsible adult has been designated and authorized to provide emergency care should the need arise.
2. Play by the rules. **ABSOLUTELY NO FOUL LANGUAGE** Allowed. **SWEARING IS A RED CARD** .
3. Be a good sport. In particular at the end of the game, shake hands, keep your spit in your mouth, and not on your hands. **Spitting is a RED CARD OFFENSE**.
4. Control your temper. Never argue with a referee. Do **NOT** verbally abuse, provoke, or deliberately distract referees, coaches, officials or players when things don't go as you wish. Club officials will deal with referees' shortcomings as well as coaches' shortcomings. We do not set a good example for our children if we openly criticize any of the above. Contact a club official if you feel there are problems that need to be rectified.
5. Aggressive and dangerous play will be dealt with by referees.
6. Do not swing from the nets, or metal posts, severe and fatal injuries have occurred in the recent years in other minor soccer leagues.
7. Jewelry is not permitted.
8. Caps may only be worn by goal keepers.
9. Each player is given a shirt, that shirt is to be worn. Designated goal keepers **WILL** wear a goal keeper's shirt (provided) or reverse their own shirt displaying the number on the front..... **NO EXCEPTIONS**.
10. Cleats are mandatory in Mosquito and Atom divisions. In Sprite and Squirt divisions cleats are optional, running shoes are allowed also.
11. Don't leave your garbage for someone else to pick up. When the fields are cut, a plastic water bottle run over by mower blades becomes razor sharp. **KEEP ONTARIO BEAUTIFUL –THAT INCLUDES OUR OWN RECREATIONAL FACILITIES!**
12. For reasons of liability we must insist that parents or non-volunteers do not take part in practices with the kids.
13. All referees in Squirt, Atom and Mosquito divisions will be given red and yellow cards for use in dealing with infractions of the rules. The yellow card when shown to a player is a method of cautioning that player for serious infractions of the rules. A player, who receives a second yellow card, will then automatically be shown a red card and removed from the playing area for the remainder of that game.
14. Coaches are warned that the rules do allow for a player committing serious foul play to be immediately shown a red card without the need for a prior caution. Coaches are advised to refer to "The Laws of the Game 2007.2008" in the coach's manual for a list of cautionable -, and sending off - offences.



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15. A player when shown the red card CANNOT be substituted.

INFRACTION OF THE ABOVE RULES MAY LEAD TO SUSPENSION FROM PLAY, OR COACHES AND PARENTS BEING REQUESTED TO LEAVE THE AREA OF THE FIELDS.



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PLAYER REGISTRATION FORM 2022 (Birth years 2006-2017)

WAINFLEET YOUTH SOCCER IS RUN BY VOLUNTEERS. LET US KNOW HOW YOU CAN HELP BY FILLING IN THIS FORM. THANKYOU!!				
Without our volunteers WYS would not exist! Every year we need dedicated individuals to Referee, Coach, or be an Assistant Coach or even Co-Coach. Maybe this is your year to help, so that our children can enjoy Wainfleet Soccer for years to come. WYS can help students fulfill volunteer hours. Training is Available!				
Full Name: _____ Age of Volunteer 15-20 years _____ 20 yrs + _____ <div style="display: flex; justify-content: space-around; width: 100%;"> Last First </div>				
Address: _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Street Address City </div>				
_____ <div style="display: flex; justify-content: space-between; width: 100%;"> Province Postal Code Township </div>				
Home Phone: (____) _____ Business Phone: (____) _____				
Cell Number: _____ E-Mail Address: _____				
Fulfilling School Volunteer Hours?	Division Preference Mosq Atom Squirt Sprite	Referee Coach Co-Coach Assist. Coach Executive Experience? Yes / No		

GENERAL SPONSORSHIP
Support Wainfleet Youth Soccer and help us offset the cost of paint, Johnny on the Spots, advertising and keep our registration costs low! Please consider supporting your local youth organization with a General Business Sponsorship. All sponsors will receive a spot on our Website.
Business Name: _____ Address: _____ Phone Number: _____ Cell Number: _____ Email Address: _____ Business Card Included: _____ \$25 _____ \$50 _____ \$75 _____ \$100 _____ Other \$ _____ <i>Receipts will be issued for over \$20.00.</i> <i>E-transfers can be made to: treasurer@wainfleetyouthsoccer.ca</i> <i>This sponsorship form can be returned to an Executive member (info@wainfleetyouthsoccer.ca) or mail to PO Box 27 Wainfleet ON L0S 1V0.</i> <i>All cheques can be made payable to Wainfleet Youth Soccer. Thank you for your support!</i>



Wainfleet Youth Soccer Participation Agreement and Terms and Conditions 2022

By signing this document you will waive certain legal rights, PLEASE READ CAREFULLY.



Name of Participant: _____ Age _____ Date of Birth _____

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Name of Participant: _____ Age _____ Date of Birth _____

IN CONSIDERATION of allowing my minor child/ward to participate in the programs, activities and events of Wainfleet Youth Soccer, I **ASSURE TO YOU THAT:**

1. I am the parent/guardian of the above named participant(s) having full legal responsibility for decisions regarding the above named participant.
2. I hereby acknowledge that I am aware of the risks and hazards associated with or related to soccer. The risks and hazards include, but are not limited to injuries from:
 - a. Vigorous physical exertion, strenuous techniques and strenuous cardiovascular workouts;
 - b. Falls to the ground due to uneven or irregular terrain or surfaces;
 - c. Collisions with soccer equipment;
 - d. Extreme weather conditions which may result in heatstroke, sunstroke or hypothermia;
 - e. Contact, colliding or being struck by other participants, spectators, equipment or vehicles; and
 - f. Exerting and stretching various muscle groups.
3. Furthermore, I am aware that my child/ward may:
 - a. Sustain injuries in soccer that can be severe, cause spinal cord injuries and even be fatal;
 - b. Experience anxiety while challenging himself/herself during the activities, events and programs;
 - c. Come into close contact with other participants, including the possibility of accidental and unexpected contact;
 - d. Risk of injury is reduced if he/she follows all the rules established for participation; and
 - e. Risk of injury increases as he/she become fatigued.

I UNDERSTAND AND AGREE, on behalf of myself, my heirs, assigns, personal representatives and next of kin that my signing of this document constitutes:

1. I understand that my child/ward cannot play in any soccer game until after this registration form and payment has been accepted by the Board of Wainfleet Youth Soccer and its appointed persons.
2. I am registering my child(ren)/ward(s) willingly and my child(ren)/ward(s) is participating voluntarily in these activities.
3. I agree that there are risks in soccer as described above and my child(ren)/ward(s) will be exposed to these risks and hazards. And I agree to accept all these risks and hazards and be responsible for any injury or other loss which my minor child(ren)/ward(s) might receive while participating in these activities.
4. I agree that there are risks associated with COVID-19 and I agree to assume those risks, for me and my child(ren) / ward(s), including but not limited to exposure and infection.
5. I accept all liability for any damage to the playing equipment caused by my child/ward's careless, negligent and/or improper handling. And I accept sole responsibility for my child/ward's personal possessions and athletic equipment
6. If something happens to my child(ren)/ward(s), I release the Organizers of responsibility for any claims, demands, actions and costs which might arise out of my child(ren)'s/ward(s)' participation. I understand "Organizers" to mean: Wainfleet Youth Soccer directors, officers, volunteers, officials, participants, sponsors owners/operators of facilities and representatives.



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7. I am aware of Wainfleet Youth Soccer's policies, rules and regulations, code of conduct and fair play and agree to abide by them and to be bound by them.

Accident Insurance

Executing this agreement will not preclude your child(ren)/ward(s) from accident insurance coverage, subject to the terms and conditions of Wainfleet Youth Soccer's insurance policy.

I ACKNOWLEDGE MAKING THIS AGREEMENT

I have reviewed the participation agreement attached and my signature affixed hereto indicates my agreement with such participation agreement.

In consideration of the acceptance of my registration with Wainfleet Youth Soccer, I parent/guardian (for the participants under 18 years of age), agree as follows:

By signing and dating below, you agree that you are the parent or legal guardian of the player(s) being registered and to be bound by this Legal Agreement even if you have not read the agreement.



Printed Name of Parent or Guardian

Signature of Parent or Guardian

Date



Wainfleet Youth Soccer

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PLAYER REGISTRATION FORM 2022 (Birth years 2006-2017)

Help us out by printing clearly and filling in all requested information for each player!!

Do not write "same as above" when registering multiple players!!! Thanks!!!

FAMILY CONTACT INFORMATION - please fill out completely - form used for master participant lists

Full Name: _____ Spouse: _____
Last First
 Address: _____
Street Address City Province

Postal Code Township (Please include)
 Home Phone: (____) _____ Cell Phone: (____) _____
 E-Mail Address: _____ Receipt Needed? Yes No

In order for your child(ren) to play you must sign and Return the Participation of Agreement & Acceptance of Terms and Conditions Pg 4

Office use Only:

Amount Paid: _____ Cheque _____ Cash _____ Late Fee _____
 # Children Reg. _____ Resident _____ Non- Resident _____ Volunteered? _____ Refund _____

PLAYER INFORMATION #1 -- do not write same as above - FILL OUT COMPLETELY form used for making teams

Full Name: _____ Parents/Guardian: _____
Last First Last (if different) First
 Birth Date: ____/____/____ Gender: _____ Medical Issues: _____
yyyy / mm / dd
 Home Phone: (____) _____ Cell Phone: (____) _____
 E-Mail Address: _____ Shirt Size: _____
office use only office use only office use only office use only

Division	Skill	Sibling	Agreement Signed?
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PLAYER INFORMATION #2 -- do not write same as above - FILL OUT COMPLETELY form used for making teams

Full Name: _____ Parents/Guardian: _____
Last First Last (if different) First
 Birth Date: ____/____/____ Gender: _____ Medical Issues: _____
yyyy / mm / dd
 Home Phone: (____) _____ Cell Phone: (____) _____
 E-Mail Address: _____
office use only office use only office use only office use only

Division	Skill	Sibling	Agreement Signed?
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PLAYER INFORMATION #3-- do not write same as above - FILL OUT COMPLETELY *form used for making teams*

Full Name: _____ Parents/Guardian: _____
Last First Last (if different) First
 Birth Date: ____/____/____ Gender: _____ Medical Issues: _____
yyyy / mm / dd
 Home Phone: (____) _____ Cell Phone: (____) _____
 E-Mail Address: _____

<i>office use only</i>	<i>office use only</i>	<i>office use only</i>	<i>office use only</i>
Division	Skill	Sibling	Agreement Signed?

PLAYER INFORMATION #4-- do not write same as above - FILL OUT COMPLETELY *form used for making teams*

Full Name: _____ Parents/Guardian: _____
Last First Last (if different) First
 Birth Date: ____/____/____ Gender: _____ Medical Issues: _____
yyyy / mm / dd
 Home Phone: (____) _____ Cell Phone: (____) _____
 E-Mail Address: _____

<i>office use only</i>	<i>office use only</i>	<i>office use only</i>	<i>office use only</i>
Division	Skill	Sibling	Agreement Signed?

PLAYER INFORMATION #5-- do not write same as above - FILL OUT COMPLETELY *form used for making teams*

Full Name: _____ Parents/Guardian: _____
Last First Last (if different) First
 Birth Date: ____/____/____ Gender: _____ Medical Issues: _____
yyyy / mm / dd
 Home Phone: (____) _____ Cell Phone: (____) _____
 E-Mail Address: _____

<i>office use only</i>	<i>office use only</i>	<i>office use only</i>	<i>office use only</i>
Division	Skill	Sibling	Agreement Signed?