



**PLANT CITY AREA SOCCER CLUB, INC.
"LANCERS"
2018-19 PLAYER /PARENT CONTRACT, CODE OF ETHICS**

Congratulations on being selected to join the Plant City Area Soccer Club, Inc. (Lancers) for the 2018-19 Season! All of our Board Members, coaches and staff look forward to a successful season. Please read the following and initial to confirm your willingness and awareness of the mutual commitments and obligations which exist between Plant City Area Soccer Club, Inc. (Lancers), player and parent.

◆ We understand that club registration fees must be paid in full for your child to be released from Plant City Area Soccer Club, Inc. during the seasonal year. That season is typically July 1 - May 31. There is also a \$200.00 release fee, which is additional to any fees owed by the player/parent. We have read and understood the "Player Release" rules in effect with the Florida Youth Soccer Association (FYSA). These rules are available at the FYSA website (www.FYSA.com)

Player's Initials

Parent's Initials

◆ We agree to make all installments and deposits by the date due as set by Plant City Area Soccer Club, Inc. The player's pass will be pulled, and he/she will not be eligible to play games/tournaments if payments are not current. Unpaid fees will result in the player being placed in "not good standing" with Plant City Area Soccer Club, Inc. and FYSA and will impact the player's ability to register with any FYSA affiliated club in the future.

Deposit for Lancers Competitive players is \$205.00 due 06/10/2018 and three (3) installments of \$100.00 due 8/1/2018, 9/1/2018 and 10/1/2018. Total of \$505.00 for the season. A \$25.00 per month late fee will be assessed to your balance for non-payment. A \$20.00 per child discount on yearly club registration fees will be extended to those families with more than one (1) child playing at the club for the 2018-19 season. Credit card payments will incur a 3% convenience fee to cover the cost of the credit card transaction.

Player's Initials

Parent's Initials

◆ Club registration covers FYSA/US Club passes, one league registration fee and all referee fees for one league. We understand that team expenses such as tournaments, a second or more league fee, referee fees in a second or more league and personal expenses are all separate from the club registration fees. The team may seek sponsorship to cover some of those expenses. However, they belong to the club and/or team in the event a player leaves the club.

Player's Initials

Parent's Initials

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◆ We understand that Plant City Area Soccer Club, Inc. will provide affiliation with FYSA or US Club Soccer. Teams will play in either the Florida State Premier League (FSPL), Florida Premier League (FPL), United Soccer Association (USA) or Greater Central Florida League (GCF) based on their level of play. Other affiliations can be provided at the discretion of the club. However, any fees incurred must be paid by the team/teams wanting to play in those specific leagues.

Player's Initials

Parent's Initials

◆ We understand that this is a competitive environment and there is NO guarantee of minimum playing time. We also agree to adhere to the Plant City Area Soccer Club, Inc. policy of not allowing members of our club to guest play with other clubs or members of other clubs to guest play with Plant City Area Soccer Club, Inc. teams, without the express written approval of the Director of Coaching and Club Registrar at their sole discretion.

Player's Initials

Parent's Initials

◆ We understand that each player and his/her family is required to volunteer for a minimum of five (5) hours during the season. Volunteer hours consist of, but not limited to, working the concession stand or field marshal at any club event. A schedule may be posted in order of teams or individual basis. If volunteer hours are not met, there will be a \$50.00 fee added to the player's balance.

Player's Initials

Parent's Initials

PLAYER NAME: _____

SIGNATURE: _____ DATE: _____

PLAYER ADDRESS: _____

PLAYER PHONE NUMBER: _____

PLAYER DATE OF BIRTH: _____ PLAYER AGE GROUP: _____

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

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FYSA CODE OF ETHICS

Players

- I will encourage good sportsmanship from fellow players, coaches, officials and parents at all times.
- I will remember that soccer is an opportunity to learn and have fun.
- I deserve to play in an environment that is free of drugs, tobacco, and alcohol; and expect everyone to refrain from their use at all soccer games.
- I will do the best I can each day, remembering that all players have talents and weaknesses the same as I do.
- I will treat my coaches, other players and coaches, game officials, other administrators, and fans with respect at all times; regardless of race, sex, creed, or abilities, and I will expect to be treated accordingly.
- I will concentrate on playing soccer. Always giving my best effort.
- I will play by the rules at all times.
- I will at all times control my temper, resisting the temptation of retaliate.
- I will always exercise self-control.
- Conduct during competition towards play of the game and all officials shall be in accordance with appropriate behavior and in accordance with FIFA's "Laws of the Game", and in adherence to **FYSA** rules.
- While traveling, shall conduct themselves so as to bring credit to themselves and their team.
- **Alcohol, illegal drugs and unauthorized prescription drugs shall not be possessed, consumed or distributed before, during or after any game or at any other time at the field and/or game complex.**

Parents/Spectators

- I will encourage good sportsmanship by demonstrating positive support for all players, coaches, game officials, and administrators at all times.
- I will place the emotional and physical well-being of all players ahead of any personal desire to win.
- I will support the coaches, officials, and administrators working with my child, in order to encourage a positive and enjoyable experience for all.
- I will remember that the game is for the players, not for the adults.

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- I will ask my child to treat other players, coaches, game officials, administrators, and fans with respect.
- I will always be positive.
- I will always allow the coach to be the only coach.
- I will not get into arguments with the opposing team’s parents, players, or coaches.
- I will not come onto the field for any reason during the game.
- I will not criticize game officials.
- Alcohol, illegal drugs and unauthorized prescription drugs shall not be possessed, consumed or distributed before, during or after any game or at any other time at the field and/or game complex.
- I will refrain from any activity or conduct that may be detrimental or reflect adversely upon FYSA, its members or its programs

Failure to comply may result in the suspension of your privilege to participate in FYSA sanctioned events, for the following periods:

1st offense suspension minimum thirty (30) days to a maximum of five (5) years
2nd offense suspension for a minimum of one (1) year to a maximum of Ten (10) years 3rd offense
suspension for a minimum of five (5) years to a maximum of fifty (50) years.

NOTE: Any individual charged with a violation of this Code of Ethics shall be afforded due process as defined in FYSA’s rule section 600 before the implementation of any suspension.

◆ We have reviewed and read the FYSA Code of Ethics and agree to abide by these Ethics as they are part of Plant City Area Soccer Club, Inc. and apply to practices, games, tournaments, any club affiliation, league or function. Players must conduct themselves accordingly or they will be subject to disciplinary action.

Player’s Initials

Parent’s Initials

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FYSA ACKNOWLEDGEMENT OF REGISTRATION

FYSA RECOMMENDS THAT PLAYERS NOT REGISTER TO A TEAM WHOSE AGE GROUP EXCEEDS THE PLAYERS NORMAL AGE. It is FYSA's policy that all players compete at a level they are capable of both physically and developmentally. For a player to move up more than one age grouping will require approval from the affiliate's Director and Agent of Record and FYSA'S Director of Coaching.

INSURANCE NOTICE:

All injuries must be reported within 90 days of the date of injury.

INFORMED CONSENT:

I, the parent/guardian of the registrant, agree that we will abide by the Rules of Plant City Area Soccer Club, Inc., the State Association (FYSA) and all its affiliated organizations. My/our child wishes to participate in soccer during the season of this registration. I/we realize risks are involved in my/our child's participation. I/we understand that the risk to my/our child includes full range of injuries from minor to severe, and the result could be death, paralysis, or other serious, permanent disability. I/we accept this risk as a condition of my/our child's participation.

PLAYER NAME : _____ DATE: _____

PLAYER SIGNATURE: _____ DATE: _____

PARENT NAME: _____ DATE: _____

PARENT SIGNATURE: _____ DATE: _____