



Registration Package with Checklist

1. ___ Online payment receipt printed (If done online)
2. ___ MUE Player Contract (completed and signed)
3. ___ MUE Player Code of Conduct (completed and signed)
4. ___ MUE Parent Code of Conduct (completed and signed)
5. ___ FYSA Code of Ethics (completed and signed)
6. ___ MUE Medical Release (completed, signed and notarized)
7. ___ Copy of player birth certificate (**only NEW PLAYERS to FYSA**)

Pictures can be given to the coach/team manager later...if needed.

The items listed above are what you need to bring to the field on registration day. If you registered online, you do not need to bring the first item as all of the necessary information is already in our system. You must, however, bring the rest of the items listed. Please contact registrar@muefc.org should you have any questions.

To access a copy of this packet, you can go to our web site, www.miramarunitedelitefc.org or www.muefc.org.

Sincerely,

Miramar United Elite FC Board of Directors



Player Name: _____ Age Group: U- _____ Boys / Girls
D.O.B: ____/____/____ Email: _____
Address: _____ City: _____
State: FL Zip: _____ Home Number: _____
Mom's cell number: _____ Dad's cell number: _____

MIRAMAR UNITED ELITE FC 2018-2019 PLAYER/PARENT COMMITMENT FORM

Congratulations on being selected as a team player for **MIRAMAR UNITED ELITE FC** for the **2018-2019 Seasonal Year!** Your skills, dedication and hard work have made you eligible to join one of the elite and promising soccer clubs in the United States. Our coaches and Board of Directors hope that this will be an enjoyable year for you and your family. As part of the registration process we want to insure that you are fully aware of, and understand the commitments Miramar United Elite FC makes to you, and what our expectations and obligations from you are, as a result of your accepting the position offered to you. Please initial the points below acknowledging your understanding of the mutual expectations between you and Miramar United Elite FC, then sign and date below.

► We understand that a registered player is obligated to his/her team for the entire seasonal year. We understand that accepting this offer to join Miramar United Elite FC and completing the registration documents obligates me to pay the full amount of the annual player fees for my child to participate as a member of Miramar United Elite FC for which he/she is selected. I recognize that by agreeing to be a member of the team, my child is taking a position that may not be filled after the start of the year, and the team is relying on my payment to be able to operate. Therefore, even if my child elects to leave the team during the 2018-2019 season, I agree that the full amount of fees is payable by me. I agree that annual player fees are non-refundable.

Player's Initials

Parent's Initials

► We understand that Miramar United Elite FC will provide the required training and coaching as well as provide opportunities to participate in league and cup games. Uniforms are purchased separately from our vendor at www.soccer.com unless advised otherwise in writing.

Player's Initials

Parent's Initials

► We understand that since this is a premier competitive environment, there CANNOT be any guarantee of minimum playing time on the field. We also understand and agree to abide by Miramar United Elite FC policy of not allowing players to guest play with other teams or members of other teams to guest play with Miramar United Elite FC teams, except with the express written approval of the team’s respective coaches as per FYSA guest player rules. These exceptions will only be granted if all player’s fees and financial obligations have been fulfilled

Player’s Initials

Parent’s Initials

► The undersigned do hereby FULLY RELEASE, FULLY WAIVE, FULLY DISCHARGE, AND COVENANT NOT TO SUE, Miramar United Elite FC., its officers, directors, agents, independent contractors, successor or assigns, (hereinafter collectively referred to as “releases”) and each of them, from any and all claims, and/or the ordinary negligence of released, and/or the strict liability, and/or the negligence of any third party or participant, which causes the undersigned injury, death, personal injury, bodily injury, property damages, or any other type or kind of injury, and/or loss, and/or damages. The undersigned hereby covenants to hold “releases” harmless from and to fully indemnify “releases” for any type or kind of damages, judgments, awards, or related expenses (including but not limited to releases’ attorney fees and court costs) that “releases” may incur as a result of the participation of the undersigned in any activity, and/or game, and/or match, and/or practices, and/or camps, and/or scrimmages, and/or leagues, conducted within the club’s premises at any time.

Player’s Initials

Parent’s Initials

► We understand breaking the Player Code of Conduct or Parent Code of Conduct or fail to pay said dues on time can lead to full suspension from the club for a period of time decided by the management of the Miramar United Elite FC with no entitlement to refunds or a full release from the club.

Player’s Initials

Parent’s Initials

► Additionally, we understand that we will share in team expenses above and beyond the club registration fees noted above, to cover entry fees to selected tournaments that the team decides to participate in and our travel costs associating with attending these events. The team may seek and receive donations or fund-raise to defray these expenses as well as expenses related to the purchase of training equipment, bags, warm-ups or any other expenditure agreed upon by the team. I understand that all funds collected will be credited to my child’s team account to be used for such team expenses. These funds remain with Miramar United Elite FC should the player decide to leave the club.

Player’s Initials

Parent’s Initials

► Should the player wish to be released into the State Pool or wish to transfer to another club prior to the end of the seasonal year, the player/parents will be required to pay a **\$800.00** transfer/release fee to Miramar United Elite FC, in addition to fulfilling all financial obligations noted above before the Change of Status is processed.

Player’s Initials

Parent’s Initials

► We understand that failure to fulfill our financial obligations to Miramar United Elite FC may result in the player being placed “Not in Good Standing” with Miramar United Elite FC and FYSA, which will result in the player’s playing privileges being suspended until the obligations are fulfilled. This will also impact the player’s ability to register with Miramar United Elite FC or any other affiliate next year.

Player’s Initials

Parent’s Initials

► We understand that online payment of annual player fees is required, and that checks or money orders will be accepted only in limited circumstances and by express authorization by Miramar United Elite FC. If my check or checks are returned for insufficient funds, I agree to **pay an additional “insufficient funds fee” of \$50.00** per returned check. I further agree to **pay an additional 5% late fee** for each payment that is received 15 days past the due date of the payment installment. I also agree to pay a **\$50 administrative processing fee** if I choose to use a payment plan.

Player’s Initials

Parent’s Initials

► I will pay the annual player fees as follows in the schedule below. **PLEASE INITIAL ONLY THE PAYMENT OPTION SELECTED.**

BOYS ENCL	NATIONAL & REGION LEAGUE
OPTION A: _____ (initial here) Payment in Full \$1600.00 due upon registration	OPTION A: _____ (initial here) Payment in Full \$1500.00 due upon registration
OPTION B: _____ (initial here) Initial payment of \$525.00 registration fee due at registration. Remainder to be paid in 2 installments of \$625.00 on July 1st and \$500.00 on August 1st. If you choose Option B , there is a \$50 administrative processing fee , which is included. Entire amount (\$1650) must be paid by August 15th NO LATER!	OPTION B: _____ (initial here) Initial payment of \$525.00 registration fee due at registration. Remainder to be paid in 2 installments of \$525.00 on July 1st and \$500.00 on August 1st. If you choose Option B , there is a \$50 administrative processing fee , which is included. Entire amount (\$1550) must be paid by August 15th NO LATER!
STATE LEAGUE, FSPL, US CLUB	FYSA
OPTION A: _____ (initial here) Payment in Full \$1300.00 due upon registration	OPTION A: _____ (initial here) Payment in Full \$1200.00 due upon registration
OPTION B: _____ (initial here) Initial payment of \$525.00 registration fee due at registration. Remainder to be paid in 2 installments of \$525.00 on July 1st and \$300.00 on August 1st. If you choose Option B , there is a \$50 administrative processing fee , which is included. Entire amount (\$1350) must be paid by August 15th NO LATER!	OPTION B: _____ (initial here) Initial payment of \$525.00 registration fee due at registration. Remainder to be paid in 2 installments of \$525.00 on July 1st and \$200.00 on August 1st. If you choose Option B , there is a \$50 administrative processing fee , which is included. Entire amount (\$1250) must be paid by August 15th NO LATER!

We have read the **FYSA Code of Ethics and Miramar United Elite FC Player/Parent Code of Conduct** as printed below, and agree to abide by the requirements. We will act in a manner of respect at all practices, games, travel, etc, and serve as role models to others to maintain the integrity of ourselves, our team, and all of **Miramar United Elite FC**. Players will conduct themselves in accordance with **Miramar United Elite FC, FYSA, USYSA, USSF, and FIFA** rules at all times, or will be subject to disciplinary action.

Player’s Initials

Parent’s Initials

Parent’s Signature: _____

Date: _____

Player’s Signature: _____

Date: _____

FYSA CODE OF ETHICS

PLAYERS:

- I will encourage good sportsmanship from fellow players, coaches, officials and parents at all times.
- I will always 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 training and 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 to retaliate, and not use foul language or inappropriate sign language at any time.
- My 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, I will conduct myself so as to be a credit to myself, and my team.
- A player cannot be cut from a team after he/she is registered to that team, unless he/she has exhibited conduct requiring dismissal, without prior consent from the BOD. If requested by the player and/or parent, a hearing must be held for any involuntary player release.
- **Alcohol, illegal drugs, tobacco products and unauthorized prescription drugs shall not be possessed, consumed or distributed before, during or after any game or at any 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.
- I will ask my child to treat other players, coaches, game officials, administrators, and fans with respect.
- I will always be positive and not use foul language or inappropriate sign language at any time.
- I will always allow the coach to be the only coach, by refraining from coaching from the sidelines.
- I will not enter into arguments with the other team's parents, players, or coaches.
- I will not enter the field of play for any reason during the game.
- I will not criticize game officials.
- **Alcohol, illegal drugs, tobacco products and unauthorized prescription drugs shall not be possessed, consumed or distributed before, during, after the game or at any other time at the field and/or game complex.**

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

1st Offense: Suspension for a minimum thirty (30) days to a maximum of (5) year.

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.

FYSA ACKNOWLEDGMENT OF REGISTRATION

FYSA RECOMMENDS THAT PLAYERS NOT REGISTER TO A TEAM WHOSE AGE GROUP EXCEEDS THE PLAYERS NORMAL AGE.

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

INFORMED CONSENT: I, the parent/guardian of the registrant, agree that we will abide by the rules of **Miramar United Elite FC**, 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 (PRINT)

PLAYER SIGNATURE

Date

PARENT NAME (PRINT)

PARENT SIGNATURE

Date

CLUB REPRESENTATIVE

TEAM COACH

Date



MEDICAL RELEASE FORM

I, _____ (Parent/Guardian's Name) hereby give permission for any and all medical attention to be administered to my child, _____ (Child's Name) in the event of an accident, injury, sickness, etc., under the direction of the person(s) listed below, until such time as I may be contacted. I also assume the responsibility for the payment of any such treatment. This release is effective for the period of one year from the date given below.

*****PLEASE BE SURE TO PROVIDE THE INFO BELOW*****

Address: _____

City: _____, FL Zip Code: _____

Home Phone: (_____) _____ - _____ Cell Phone: (_____) _____ - _____

Email Address #1: _____ Email Address #2: _____

Insurance Company: _____

Policy Number: _____ Physician Name: _____

Physician's Address: _____

Physician's Phone: _____

Known Allergies: _____

In case I cannot be reached, any of the following persons is designated to act on my behalf.

* Coach Name: _____

* Assistant Coach: _____

* Team Manager: _____

* A league representative where my child is playing.

* Any tournament representative where my child is participating in a tournament

Parent's Signature: _____ Date: _____