

# SSA Cobb Registration Information

## SSA Cobb Fall 2014 Soccer

## How and When to Register for Recreational Soccer - U4 Tot Soccer, and U5 to U19 Soccer Development League

## **Open Registration**

\*Recreational players may register in three ways...1) online using a Visa, MasterCard or American Express at <u>www.SSAelite.com</u> - COBB Location, 2) in person at SSA office, or 3) through the mail. Paperwork received through the mail must be received by July 31, 2014 to be considered with regular registration.

## \* An Early Bird Discount of (\$10) applies if you register before June 30<sup>th</sup> 2014!

## Our online registration site closes midnight July 31

## Teams will be formed beginning August 1

## Wait List/Late Registration begins August 1 \*

\*Players who register after July 31 will be placed onto a team only after all registrations received by the stated deadline are processed and players are placed.

\*If all teams are full, players will be placed onto a waiting list and assigned onto a team once an opening becomes available.

## Fall 2014 Season Calendar:

U4 Age Group Meeting: September 13 U5 to U8 Age Group Meeting: Week of August 11 U10 and U12 Age Group Meeting: Week of August 11 U14 to U19 Coaches Meeting: Week of August 11 Under 4 Season: September 13 to October 18 Under 5 to U19 Season: August 25 to November 8

## Field Hotline - 404-818-9221

Fields are located on a flood plain and often remain closed several days after a heavy rain. It is therefore important that you call this number frequently to receive information about field closures.

## **GENERAL INFORMATION:**

- No refunds will be issued after practice begins even if the player has not participated
- Returned checks will incur a \$25 charge
- Practice schedules will not be available before the coaches meet
- Game schedules will not be available until practice begins
- Games scheduled for Saturdays although possibility of Friday evening or Sunday afternoon games (U10 +)

## **LEAGUE Division Birthdates and Program Descriptions**

### U4 Tot Soccer @ Mud Creek......8/1/10-7/31/11

- Sat morning practices including mini-soccer games
- Weekly 1 hour session led by SSA coaching staff with assistants
- 6 Week Non Competitive Session

## 

## U6 SDL @ @ Mud Creek......8/1/08-7/31/09

- 1 hour per week practice (either T or W)
- Mini soccer game format (3v3, no goalkeepers)
- Saturday games played at 9 am or 10:30am, determined by schedule
- Coed Division
- Volunteer Parent Coach
- 9 to 10 Week Non Competitive Session

## U8 SDL @ @ Mud Creek......8/1/06-7/31/09

- 2 one hour practice sessions per week (M and Th where possible)
- Saturday games played in a 5v5 format with goalkeepers
- Saturday games played 10:45am or 12:30pm, determined by schedule
- Players will be placed in either coed or girls division
- Volunteer Parent Coach
- 9 to 10 Week Non Competitive Session

## U10 SDL @ Mud Creek......8/1/04-7/31/07

- 2 one hour practice sessions per week (T and Th where possible)
- Weekend games played in a 6v6 format with goalkeepers
- Inter scheduled play with other clubs possible
- Players will be placed in either coed or girls division
- Volunteer Parent Coaches
- 9 to 10 Week Competitive Session

## U12 SDL @ Mud Creek......8/1/02-7/31/05

- 2 one hour practice sessions per week (M and W where possible)
- Weekend games played in an 8v8 format
- Inter scheduled play with other clubs possible
- Players will be placed in either coed or girls division
- Volunteer Parent Coaches
- 9 to 10 Week Competitive Session

U14 SDL @ Mud Creek	
U16 SDL <i>@</i> Mud Creek	
	0/1/05 5/21/00

- Weekend games played in an 11v11 format
- Inter scheduled play with other clubs possible
- Players will be placed in either coed or girls division
- Volunteer Parent Coaches
- 9 to 10 Week Competitive Session

Top Soccer.....

A program designed to bring the opportunity of learning and playing soccer to any boy or girl, ages 4-19, which has a mental or physical disability. For additional information please contact Robin Boyer at <u>robinl264@yahoo.com</u>

## For more information on any of the programs listed above please contact: Sharon Gaughan, Administrator

678-594-5041 or SharonGaughan@SSAElite.com



## Fall 2014 SSA Cobb Recreational Registration Form

Player's LAST Name:	FIRST Name:		(Circle) M / F
Player's Address (# and street)		Birth Dat	e: .
(City)	GA (zip)	School	
Home Phone	Family Email		<u> </u>
Mother's Name	Phone	Occupation	
Father's Name	Phone	Occupation	
Coach Request	Player Request	Team Request	
Which request is most important (Coach, Play We will try to honor requests, but CANNOT guard	er or Team)		
Number of seasons playing organized soccer	Previous playing level (Church League, Red	creational, Academy, Select)	_ Previous Club
Any physical/health issues we should know al	pout?		
	soccer program is made up entirely of volunteers. We re indicated and the Recreational Director will be in tou		players can play. If you are

Yes I would like to coach! Coaches Name

### **UNIFORM INFORMATION:**

U4 will receive SSA T-Shirt included in registration fee.

U5 to U19 must purchase a uniform. Members are requited to purchase SSA uniform online through SSA Eurosport website. Please visit <u>www.SSAelite.com</u> - COBB location for more details and to order uniform. It is strongly recommended that members order uniform upon registering for a Rec program.

Contact email

### **REGISTRATION FEES:**

Fall 2014	Under 4	Under 5	Under 6	Under 8	Under 10	Under 12 through Under 19
Fees	\$75	\$100	\$100	\$120	\$160	\$170
Uniform	SSA T-shirt	Purchased Separately	Purchased Separately	Purchased Separately	Purchased Separately	Purchased Separately

#### AMOUNT DUE:

### PAYMENT:

IN PERSON, cash, check or credit card payments are accepted at the SSA office located at 40 Whitlock Place, Suite 200, Marietta, GA 30064 \* MAIL your check or credit information to club offices \* Or, FAX with credit card information to 770-423-4954.

( ) Cash Amount (	() Personal Check Amount		Check Number
( ) Credit Card ( ) VISA ( ) MasterCard ( ) Ar	merican Express	Cardholder Name	
Card #	Ехр.	Date S	Signature:

AUTHORIZATIONS & WAIVERS: I hereby give approval for the participation of my child in any GSSA and affiliated associations or league activities and I assume all risk and hazards incident to such participation including transportation to and from said activities waive, release, absolve, indemnify and agree to hold harmless the GSSA and affiliated association, league, the organizers, supervisors, officers, coaches, directors, participants, and persons or parents supervising or transporting participants to or from such activities from any claims arising out of injury to my child. I understand that a player who registers with SSA is bound to playing at SSA for the entire seasonal year, unless a transfer request for extenuating circumstances is executed. As parent/guardian of the minor named above, I authorize SSA to publish photographs of my child, in print and electronic media including publication on the SSA's internet web site, newsletter, or other SSA-related purposes. This permission is given with no promise or expectation of value in return.

PARENT – GUARDIAN SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_/\_\_\_/\_\_\_\_/

SSA 40 Whitlock Place, Suite 200, Marietta, GA 30064 Phone 678-594-5041 Fax 770 423-4954