



Dublin-Darlington Recreation Council
Dublin-Darlington Soccer
FALL 2011

www.dublindarlingtonsoccer.com

email: ddsoccerclub@yahoo.com



Dublin-Darlington Soccer Club is a Recreation Soccer Club which is currently accepting applications for the Fall 2011 Recreation Soccer season.

Teams will play in the Eastern Southern Soccer League (ESSL) with practices in the Dublin/Darlington area of Harford County beginning in early August. Clinic games are played on Friday evenings beginning in September, and U8/10/12/15 games are played on Saturdays in September, October, and early November at ESSL sites throughout Harford County. *Note: The Clinic league is an in-house league with all games played at Francis Silver Park in Darlington.*

AGE GROUPS
CO-ED CLINIC (4&5 yr olds) - 4 yr. old must be "4" NO LATER THAN July 31, 2011
BOYS - U8, U10, U12, & U15 Age Groups
GIRLS - U8, U10, U12, & U15 Age Groups <i>Note: Players who turn 15 before Aug 1, 2011 are not eligible</i>
<i>Note: Age Group is determined by Child's age on July 31st, 2011</i>

REGISTER AND PAY SECURELY ONLINE (Preferred Method) at
www.dublindarlingtonsoccer.com
or complete the following registration form and mail-in

REGISTRATION FEES: \$70 per child; \$60 per additional child from same family; \$160 maximum family rate. *A \$20 late fee will be assessed on registration forms received online (or postmarked after) June 15th, 2011. Late registrants are not guaranteed placement. NOTE: Recreation Council Policy: "Registration fees are non-refundable"*

DEADLINE FOR REGISTRATION IS JUNE 15th, 2011.

OTHER OPPORTUNITIES:

Interested in being a Head Coach or being a Corporate Sponsor? Let us know when you register or contact us at ddsoccerclub@yahoo.com

Looking for a Summer Soccer Camp? Check out our website for more info on the Challenger British Summer Soccer Camp, Evenings of July 25th-29th



Dublin-Darlington 2011 Fall Soccer Mail-In Registration Form

DEADLINE FOR REGISTRATION IS JUNE 15th, 2011

Payment should be made payable to: **Dublin-Darlington Recreation Council**
Mail the registration form & payment to: **DDSC, PO Box 793, Havre de Grace, MD 21078**

Name	Sex	Date of Birth
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Street	Town	State	Zip	Age as of 7/31/2010
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Home Phone	Work Phone	E-Mail Address	Contact for Emergency
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Years soccer experience _____ Please check if your son or daughter is a carded player (Travel or Club)

_____ Interested in receiving information regarding Travel Soccer Tryouts via email?

Registration Fee: _____ Total Amount Enclosed: _____

Shirt Size: Youth Small Youth Med. Youth Large
 Adult Small Adult Medium Adult Large Adult X-Large

I am interested in being a Head Coach. Name _____

I would like to sponsor or know someone who would like to sponsor a team (\$125). (Business, Individual, etc.)

Sponsor Name _____

Any physical conditions or allergies that the program should be aware of: _____

By my signature below, I hereby permit my son/daughter named above to play in the Fall 2010 Dublin-Darlington Youth Soccer Program. I will not hold the officers of the Dublin-Darlington Recreation Council, the youth soccer program nor the coaches responsible for any injuries sustained by my child while participating in the program. I also certify, by my signature, that my child is physically fit to participate in this program. I understand that there is an inherent risk involved in participating in any program and I certify by my signature below that my child is capable of participating in this program. I also agree that my child and family will abide by the Dublin-Darlington Recreation Council Code of Conduct. I also understand that my child will not be covered by any program insurance.

Parent/Guardian's Signature

DATE

_____ Check Here if you'd like to receive additional information about other Dublin-Darlington Recreation Council Activities (e.g., lacrosse, basketball, etc.) throughout the year

The sale or use of tobacco in any form is prohibited in school buildings and on school grounds. Failure to comply with this request will subject the individual and/or group to revocation of their opportunity and/or permit to use said facility. The Department of Parks & Recreation encourages the participation of individuals with Disabilities. If accommodations are needed you may contact the Havre De Grace Activity Center at 410-939-6724. Please give two weeks notice. This document is available in an alternative format upon request.