

# MICRO REGISTRATION FORM

## Spring 2012

### Chapel Hill Program

### \$85 Registration Fee

**Please choose your preferred location:**

Tuesday and Thursday 5:30-6:30 @ Southern Community Park \_\_\_\_\_

Wednesday and Friday 5:30-6:30 @ Homestead Park \_\_\_\_\_

Mail Registration form and Payment to -

**Triangle United**

**c/o Micro**

**PO Box 2321**

**Chapel Hill, NC 27515**

Player's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Player's Address: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

T-shirt size: YS \_\_\_ YM \_\_\_ YL \_\_\_ YXL \_\_\_

#### PARENT/GUARDIAN INFORMATION

Mother/Guardian: \_\_\_\_\_ Father/Guardian: \_\_\_\_\_

Street Address \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ ext. \_\_\_\_\_

Mother's Workplace: \_\_\_\_\_ Email: \_\_\_\_\_

Father's Workplace: \_\_\_\_\_ Email: \_\_\_\_\_

I intend to allow my child to participate in Triangle United and recognize that soccer is a collision sport and the risk of physical injury is inherent to the sport. I certify that my child is medically sound and physically fit to play soccer. I am aware of and voluntarily assume all risks – regardless of their causes – to my child, including accidental injury or injury caused by the negligence of others, arising from his/her participation in Triangle United Micro and/or its activities, including participation in the sport of soccer. Such risks specifically include but are not limited to – and I certify that I will make my child aware of – the danger of significant personal injury (including death) associated with soccer goals which may tip over or collapse when used as a device on which to climb, hang or otherwise play or when improperly moved or secured. I understand that it is not the responsibility of or its representative to serve as a guardian of my child's safety. I am responsible for my child's protective equipment and the use by my child of protective equipment, including shin-guards and mouthpieces and for the condition of his/her cleats if he/she chooses to wear them. Furthermore, I understand those weather conditions and conditions of the playing field can vary and can increase the risk of personal injury. I will note the weather conditions and the condition of the field and I voluntarily assume all risks to my child arising from such conditions. In consideration of Triangle United sponsoring its program, I will not hold Triangle United or any of its officers, employees or agents liable in damages for any injuries my child might sustain while participating in the Triangle United and any activities of leagues sponsored by it. I hereby release and forever hold harmless Triangle United and all of its officers, employees or agents from any liabilities, claims damages or losses arising from or in any way relating to my child's participation in the soccer club. My signature below indicates that I have carefully read the registration form, accurately completed it, and fully understand the Release and Assumption of Risk, which I am voluntarily signing, will bind me, my heirs, and my personal representatives.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

# MICRO PROGRAM INFORMATION

## Triangle United Soccer Association

The Micro program is divided into two different player groups U6 (under 6) players with birthdates between 8/1/2005 - 7/31/2007, and U8 (under 8) players with birthdates between 8/1/2003 - 7/31/2005.

The Micro Soccer Program is designed to teach the beginning soccer player the basic technical skills used in the game of soccer. An excellent way for your child to learn through games and activities designed to ensure fun and learning. The curriculum is age appropriate with the heaviest emphasis placed on fun. The season runs for 9 weeks.

- Season will start between mid-March and April based on field availability.
- There will be both U6 and U8 player pools. There are no set teams allowing the flexibility to create the appropriate competitive level for all players in training and games.
- Each week the pool of players will train on Tuesday/Wednesday and play games on Thursday/Friday from 5:30-6:30pm depending on the location you select. Games are played in a 3v3 or 4v4 format (no goalkeepers) to allow for maximum touches on the ball and increased participation. All training and games are led by the professional staff of Triangle United.
- All-Inclusive Cost – includes training and game sessions led by Triangle United professional staff and player jerseys. Parent volunteers are encouraged and needed to assist in keeping the players engaged and involved with the training and games.
- If you have any questions regarding Micro or any Triangle United program you may either call the office at ( 919) 942-1995 or email our Director of Soccer, John Cirillo at [jcirillo@triangleunited.org](mailto:jcirillo@triangleunited.org)

Information on all of our programs can be found on our website at [www.triangleunited.org](http://www.triangleunited.org)