



HYSA ACADEMY

Information and Registration Packet



HYSA Academy is a developmental program for U9 and U10 players seeking a more competitive level of play and wanting to advance their skills to the next level. The program is built around creating an environment for youth players to excel both technically and tactically. Our club strives to cultivate a healthy competitive spirit, good sportsmanship, and respect for others on and off the pitch.

Academy Observation / Meet the Trainer Night

HYSA will host two observation nights, giving interested players an opportunity to participate in a practice session facilitated by one of our professional trainers. These sessions are designed to expose new/interested players to the Academy training environment. The ultimate goal is to help parents and players decide whether they wish to participate in our Academy program. Those who wish to join HYSA's Academy program will attend the Academy Commitment Night and submit all necessary registration paperwork.

Academy Commitment Night

Joining HYSA's Academy program requires commitment for the full seasonal year (Fall and Spring season). HYSA will hold a commitment night to ensure all registration paperwork is submitted. The Academy Commitment Night is the first meeting of each Academy team and is an opportunity for players and parents to meet each other, as well as meet the team coach and trainer.

Things to bring with you to Academy Commitment Night:

- Player's birth certificate (copy)
- Initial **non-refundable** commitment fee (\$100, preferably paid by check to HYSA)
- Player Code of Conduct form (in packet)
- Parent/Spectator Code of Conduct, Financial obligation, and Volunteer Commitment form (in packet)
- STYSA Medical Release form (in packet)
- Academy Registration Form (in packet)



HYSA ACADEMY

Player/Parent Expectations and Guidelines



HYSA Academy is committed to providing the highest quality soccer for boys and girls of all ages, ethnicities, and skill levels. **In order to preserve and protect this reputation, it is the strict policy of HYSA that all teams abide by the following guidelines for practices, games and tournaments.**

Player Expectations

- Attend all practices/games with the correct uniform and proper equipment and a serious attitude to learn and train hard to each and every practice.
- Know and respect the rules of soccer and abide by them at all times, including rules and regulations of HYSA.
- Show respect and courtesy to coaches, team managers, teammates, spectators, referees, and opponents at all times. (Remember to treat others as you would like to be treated).
- Maintain control of one's emotions, avoiding the use of abusive or profane language, taunting or humiliating remarks, and/or gestures and physical assault upon another player at any time.
- Academy Players must always be positive role models to other players.
- Each player's family is required to contribute a minimum of 8 volunteer hours during the seasonal year to the benefit of HYSA.
- Each player's family is required to contribute to HYSA fundraiser project(s).

Uniform Policy: Remember - **you** are representing yourself, your team, your family and your club.

- **Training Uniform:** Academy training shirt, black shorts, black socks.
 - **AWAY – Game Uniform:** White jersey, blue shorts, and blue socks.
 - **HOME – Game Uniform:** Blue jersey, blue shorts, and blue socks.
- *As always, please bring both game jerseys to every game.
*For cold weather, warm-ups are allowed for practice and warm up, but not during games. Under garments must match the color of the short and/or shirt. Gloves and other accessories are allowed during a game as long as they match the uniform.

Practice Expectations

- Practices are MANDATORY unless otherwise communicated.
- Players must attend all scheduled practices. Please notify the coach and team manager as soon as possible if a practice will be missed. It is the player's responsibility to make arrangements with the coach to make-up the missed session(s).
- Players must also notify the coach and/or team manager in advance if there is need to leave early or arrive late to practice.
- Players should arrive 15 minutes prior to practice with the appropriate uniform and equipment.
- Players should begin the warm-up routine as directed by their coach prior to the actual practice start time without being asked.
- Parents are not allowed to approach the coach or players during practice time, but should approach the team manager to summon the coach. It is better for parents to contact the coach at a time other than practice with comments/questions/concerns.
- Players are expected to make-up missed practices. The Trainer will provide direction on which practice to attend for the make-up session. This practice may be with another team.
- Players should expect to keep their areas neat at all times (line up bags, pick up trash, etc.)

Games Day Protocol

- Players must arrive 30 minutes before game time wearing the appropriate uniform. *Please remove jewelry prior to arrival.*
- Players must notify the coach or team manager in advance if they will miss a game, be late or need to leave early.
- Players must keep their sideline neat at all times (bags lined up, trash picked up, etc.)
- Players must bring **BOTH** sets of game uniforms to **ALL** games.
- Players are expected to move quickly when referee(s) arrive to check-in the team and should be polite at all times.



HYSA ACADEMY

Player Code of Conduct



Academy Player is expected to:

- Come to training and games with all the proper equipment.
- Never project negative comments towards another teammate.
- Know and respect the rules of soccer and abide by them at all times, including rules and regulations of the respective league.
- Show respect and courtesy to coaches, teammates, spectators, and opponents at all times. (Treat others as you would like to be treated.)
- Respect the referee(s) and refrain from addressing them or commenting on their decisions during or after the game.
- Maintain control of one's emotions, avoiding the use of abusive or profane language, taunting or humiliating remarks, and/or gestures and physical assault upon another player at any time.
- Display good sportsmanship at all times during the game and at the conclusion of the game. Be humble and generous in victory, and be proud and courteous in defeat.
- Control one's temper, as outbursts will not be tolerated on the field or in the playing area.
- Be a positive role model to other players.
- Be on one's best behavior at all times.
- Try hard.
- Have fun.

As an Academy Player, I _____ will contribute to the achievement of Academy's Mission, Vision and Goals, through my personal EFFORT. I fully understand that my actions are a reflection of the Club, my teammates and myself. As an Academy player, I will adhere to the Academy Player Code of Conduct and understand that any violation may be subject to disciplinary action such as: Loss of playing time, suspension for part of or all of a game or even disqualify from the club. This will be at the discretion of the Trainer.

Signature of Player

Date

Signature of Parent

Date



HYSA ACADEMY

Parent/Spectator Code of Conduct, Financial Obligation



Academy Parents/Spectators:

The parents' role is one of support to all Academy players and coaches. Parents should not and will not engage in coaching from the sidelines; criticizing players, coaches, team managers, assistant coaches or game officials; or trying to influence the makeup of the team at any time. Every parent is expected to:

- Respect other patrons. HYSA will not accept destructive conversation, embarrassments, and indiscretions at practices, games, and tournaments.
- Learn and respect the rules of soccer, and the rules of the league.
- Show respect and courtesy to game officials, coaches, and players at all times.
- Cheer for the Academy team in a positive manner, refraining at all times from making negative or abusive remarks about the opposing team.
- Promote the concept that soccer is a game, and that players and coaches on other teams are opponents, not enemies.
- Follow the chain of command. All issues shall be presented to the team manager. If the issue cannot be resolved, it may be escalated to the team trainer and / or Select Commissioner.
- Accept responsibility for other family members and / or friends that attend Academy games and practices. Academy parents will be held accountable for their actions.
- Avoid measuring the success of players and the team on the number of wins and losses, but rather on player development individually and collectively as a team.
- Avoid coaching the players on the field. Parents are spectators and they are encouraged to enjoy the matches and support the team.

(1) I, _____, will contribute to the achievement of Academy's Mission, Vision and Goals. As an Academy parent, I will adhere to the Academy Parent Code of Conduct and Financial Obligation. If I do not abide by the Academy principles and code of conduct, I understand there will be consequences, possibly including my child's removal from the team.

(2) HYSA complex is on private property and as such, HYSA reserves the right to ban any individual from our complex.

(3) I understand that if I fall behind in financial obligations, HYSA may pull my child's player card and not allow my child to participate until fees are current.

(4) I understand I am committing to HYSA Academy for the full seasonal year. If for any reason, my child does not continue with Academy, I will still be responsible for the full seasonal year fees and any outstanding balance may be submitted to a collection agency until paid in full.

Signature of Parent

Date

Signature of Parent

Date



HYSA ACADEMY

Volunteer & Fundraiser Commitment



Hays Youth Soccer Association strives to provide a quality soccer program at an affordable rate. In order for the association to function efficiently and maintain our low rates, we need active participation from our members. Each player's family will be asked to volunteer a minimum of 8 hours per seasonal year (i.e. concession stand, field maintenance, etc.) and participate in one fundraiser per season. Families unable or unwilling to volunteer or fundraise may pay an opt out fee. Please indicate your preferred method of contribution below. If choosing to opt out, the \$100 fee and or \$50 fee will be incorporated with the annual player fee.

SPECIAL NOTE: Trainers, board members, parent coaches, and team managers are exempt from this requirement.

Volunteer Commitment

- My family commits to volunteering a minimum of 8 hours during the seasonal year; 4 hours in the Fall Season and 4 hours in the Spring Season.
- My family chooses opt out of volunteering and wishes to pay a \$100.00 fee. I understand this cost for opting out of volunteering (\$100.00) will be added to my annual player fee.

Fundraising Commitment

- My family commits to participating in the one fundraiser as required by HYSA; fundraiser will take place in the Fall Season.
- My family chooses opt out of fundraising and wishes to pay a \$50.00 fee. I understand this cost for opting out of fundraising (\$50.00) will be added to my annual player fee.

Contact information:

Name: _____

Phone: _____

Email: _____



INDIVIDUAL MEMBERSHIP FORM

South Texas
Youth Soccer Association

Fees Paid



United States
Youth Soccer Association

Youth Division of the United States Soccer Federation (USSF)
Internationale de Football Association (FIFA)

Team Code

Assn. Club Level Sex Age Team No.

Team Name _____ Age Group _____

I.D.# _____

Use Birth Certificate Names Only
Last First Initial Nickname

Mailing Address _____

() Home Phone () Daytime Phone for Adults

Date of Birth _____ Verified By _____

Month Day Year

Player
 Coach
 Asst. Coach
 Other

Male
 Female

Coach's License Level

Father's Name _____ Occupation _____ Bus. Phone _____

Mother's Name _____ Occupation _____ Bus. Phone _____

List any medical problem or prohibition player has _____

Person to notify in emergency _____ Telephone _____

Doctor to notify in emergency _____ Telephone _____

Number prior seasons played _____ Last Team _____ Last League _____ Date of Last Season _____ 19 _____

Height _____ Weight _____ School _____ Other _____ Age _____ Grade _____

SHIRTS: XS S M L XL XS S M L XL Children From Family _____ Age _____

SHORTS: XS S M L XL XS S M L XL Presently _____

SOCKS: XS S M L XL XS S M L XL in League _____ Age _____

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the STYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration by the USYSA, accepting the registrant for its soccer programs and activities (the "Programs"). I hereby release, discharge and/or otherwise indemnify the USYSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

Name _____
Parent/Legal Guardian (please print)

Signature _____

PARENTAL SUPPORT

We ask for active participation of all parents in our program.

Check area(s) in which you would be willing to help.

Coach
 Asst. Coach
 Team Manager
 Team Parent
 Special Projects
 Field Preparation
 Board Member
 Publicity

Committee
 Referee
 Fund Raising
 Clerical
 Reporter
 Newsletter
 Concessions
 Donor

Other _____

CONSENT FOR MEDICAL TREATMENT (MINOR)

As the parent or legal guardian of the above-named player, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

Signature of Parent or Guardian _____

Address _____

City _____ State _____ Zip _____

Phone Home _____ Bus. _____

OFFICIAL USE ONLY

Picture Received Yes No
Birthdate Verified Yes No

Registration Fees: _____ Received By _____

Player Fee ----- \$ _____

Coach's Fee ----- \$ _____

Other ----- \$ _____ Date _____

TOTAL \$ _____

Cash \$ _____

Check No. _____ \$ _____



MEDICAL RELEASE FORM

As the parent/guardian of _____, I request that in my absence the above player be admitted to any hospital or medical facility for diagnosis and treatment. I request and authorize physicians, dentists, and staff, duly licensed as Doctors of Medicine or Doctors of Dentistry or other such licensed technicians or nurses, to perform any diagnostic procedures, treatment procedures, operative procedures and x-ray treatment of the above minor. I have not been given a guarantee as to the results of examination or treatment. I authorize the hospital or medical facility to dispose of any specimen or tissue taken from the above-named player.

Birth Date of Player ___/___/___ Date of last Tetanus Booster ___/___/___

Known allergies of this player, including any allergies to medicine _____

Any other medical problems which should be noted _____

Family Physician _____ Phone # _____

Insurance Carrier _____ Policy Number _____

Name of Parent/Guardian _____

Address _____

City/State/Zip _____

Home Phone _____ Work Phone _____ FAX _____

Person responsible for charges (if different than above) _____

Address _____

City/State/Zip _____

Home Phone _____ Work Phone _____ FAX _____

Person to notify if parent/guardian is unavailable _____

Home Phone _____ Work Phone _____ FAX _____

Signature of Parent/Guardian _____