



VS SOCCER LEAGUE

6v6 INDOOR LEAGUE



WINTER INDOOR SESSION 2017

Team Name: _____

Primary Contact Name:	Secondary Contact Name:
Address & Apt:	Address & Apt:
City, province & postal code:	City, province & postal code:
Home phone#:	Home phone#:
Cellular or business#:	Cellular or business#:
Email address:	Email address:

Division Selection: Cost per team \$1280.00 + hst – ref fees & Insurance fee not included

- SEASON STARTS WEEK OF JANUARY 8TH

- 10 games plus playoffs, 40 minute games

- all games played at Trio Sportsplex

-ref fees \$15.00/game per team x 10 games (**league will collect \$150.00 from each team and pay the ref directly to save time**)

- Insurance fees \$25.00/player & \$5.00/book if needed

DIVISION 2	DIVISION 3	DIVISION 4	NEW OVER 35 DIVISION \$1250 hst included
<input type="checkbox"/> Thursdays	<input type="checkbox"/> Mondays <input type="checkbox"/> Sundays	<input type="checkbox"/> Sundays <input type="checkbox"/> Thursdays	<input type="checkbox"/> Fridays

Awards

- 1st in each division

- Playoff Champions

Registration Agreement:

The undersigned hereby applies for team franchise in League Season for the above fee, and agrees to be bound by the rules and regulations of the league, and furthermore agrees to ensure all fees and fines are paid in full when due and/or suspension without refund. The undersigned acknowledges that the team and its players are required to pay separately game official fees each game, and personal registration fees with local soccer governing bodies. The undersigned is personally responsible for all outstanding team registration fees and fines on or before the dates agreed upon with Versus Soccer League.

Violation of such rules may result in a team fine and/or suspension. I, the undersigned, as representative of the team and all its players, acknowledge that Versus Soccer League, soccer governing bodies, and their agents are not responsible for injuries that may occur in the course of outdoor/indoor soccer games organized by Versus Soccer League and/or sanctioned Glen Shields SC. Furthermore, I hereby clear Versus Soccer League and its agents against any liability in the event of injury to any of my players, and damage or theft to my team's possessions or personal property that may occur on facility premises and other outdoor premises before, during or after league games. This agreement represents a complete understanding between Versus Soccer League and the team franchise owner and or team official/representative. Versus Soccer League reserves the rights to all photos/videos taken before, after, or during all or any games within the VSL (Versus Soccer League). As Team Representative I am taking full responsibility on signing and agreeing on behalf of my players.. As Team Representative I am taking full responsibility to notify my players of all the rules and regulations of VSL and to notify them of any changes within the league and make sure that they understand these rules and regulations and any and all team decision will be made by me on behalf of the team which they will know of before any decision is made. I do hereby grant the Versus Soccer League/Versus Sports Management or contracted photographers/videographers the permission to take photographs or film (web stream) any sanctioned event involving any registered member of the VSM/VSL. I also authorize VSL/VSM, its agents, assigns, successors or transferees without limitation, the full rights to use such photographs for publication in the form taken for the purpose of publicity, illustration, and/or advertising for the Versus Soccer League/Versus Sports Management related to promotional purposes. I understand that this image will be held strictly within the control of the VSL/VSM and will not be sold or release to third parties. I hereby waiver any rights to inspect or approve the finished product or the advertising copy, printed matter or video that may be used in connection therewith.

Team Rep Signature:

Date:

Approved by (league director):

Deposit received: **\$350.00**

Name on credit card:

Type:

Number:

Signature:

Date:

Expiry:

Amount:

Print and mail to: 601 Cityview Blvd, Vaughan, ON, L4H 0T1

League Contact: Rick 416-254-2021 Fax: 905-417-8854

May be completed and sent via email to: info@vssoccerleague.com web-site: www.vssoccerleague.com

The league reserves the right to balance out any and all divisions accordingly along with any and all schedule changes without the teams or players approval.