Brunswick Youth Soccer League
Brunswick Parks & Recreation Department

The Brunswick Parks & Recreation Department will be offering the Brunswick Youth Soccer League (BYSL), this fall. This Soccer Program is designed for boys & girls in grades K – 8 that reside in Brunswick.

BYSL offers one of the most popular and well-established youth programs in Brunswick. Our goals are to teach soccer skills in an environment that fosters player growth, encourages fun, and develops self-esteem for every player. Your child will enjoy improving their skills in a community based program, playing with and against friends, neighbors, and classmates, and with a balanced and healthy level of competition.

REGISTRATION

Registrations are being accepted now at the Brunswick Recreation Center, 220 Neptune Drive, Monday through Friday 8am-4:30pm or REGISTER ONLINE!

- $29.00 for registrations received prior to and through August 2nd (must be received by 4:30pm, August 2nd).
- $44.00 for registrations received after August 2nd (no exceptions!)
- $5.00 sibling discount for each additional child registered (within same family)

*Note: sibling discounts may only be given in our office, 220 Neptune Drive. **If you register online, you will be charged the full price.** We cannot refund the sibling discount portion of the fee paid online.

SCHEDULE

Team Placement: You will be notified by September 6th, 2019
- First Games: Saturday September 14th
- First Practices: Start week of September 8th (no night practices for K & 1 Divisions)

- Game Times: Saturdays, between 8:00 a.m. & 1:00 p.m.
  Weekday evening games: TBA (Divisions 4-5; 6-8)
- Schedules: Will be provided by coaches
- Locations: Lishness Field, Harriet Beecher Stowe School, Shulman & Edwards Fields (you will be notified)
- Picture Day: September 28th (schedule will be determined)

A “Sports Done Right” program
BYSL Player Registration 2019

Brunswick Residents ONLY: $29; ( $44 after 4:30pm August 2nd NO EXCEPTIONS!)
* $5 sibling discount (additional children, same family, in our office only. Not available online)
We cannot refund the sibling discount portion of the fee paid online.

Please Print

Please make checks payable to “Town of Brunswick”

Name_____________________________________________ Boy ☐ Girl ☐
Street Address_________________________________Town________________________
Zip _____________ Town of Residence ____________________________
Date of Birth _____________ School_______________________ Grade, (Fall of ’19) ______

Parent/Guardian #1__________________________________________ EMAIL ______________________
Parent/Guardian #1 Home Phone__________ Parent/Guardian #1 Work Phone________ Parent/Guardian #1 Cell ___________
Parent/Guardian #2 ________________________ Parent/Guardian #2 EMAIL ______________________
Parent/Guardian #2 Home Phone__________ Parent/Guardian #2 Work Phone________ Parent/Guardian #2 Cell ___________

Emergency Contact (other than parent/guardian)______________________________________________________________

Relationship________________ Home Phone__________ Work Phone_________ Cell Phone____________

ALLERGIES/PHYSICAL or MEDICAL LIMITATIONS ____________________________

Off-season soccer experience: did your child participate in camps or other soccer programs since last season?

Please List:__________________________________________________________

Most coaches like to communicate by email, please let us know what your email address is:

Email:______________________________________________________________

As a parent, I give my child permission to participate in the Brunswick Parks and Recreation Department BYSL program. I understand that photographs taken of Parks and Recreation Programs may be used by the Parks and Recreation Department for promoting programs, classes or events to include brochures, posters or web page postings.

Signature of Parent/Guardian __________________________________________

Names of Parents/Guardians___________________________________________ (PLEASE PRINT)

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SPONSORSHIP OPPORTUNITIES
Do you wish to sponsor a team at $135/team? _____ Contact the Brunswick Recreation Center at 725-6656
Team Sponsor’s Name_____________________________________________________

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VOLUNTEERS NEEDED
BYSL is an all volunteer organization; we need your help! It takes many people to provide this program to you and your child. Please consider helping us in some way or another. If you have an interest in coaching or assistant coaching during the upcoming BYSL season, then we would like to hear from you. BYSL provides professional training, including: hands on clinics, NYSCA training, handbooks, and advice from experienced coaches. Most coaching tools you already have and use every day as a parent: a desire to have fun with your child and other children, a desire to teach your child and other children, a desire for your child and other children to make new friends and be part of a team.

Please let us know if you are willing to help in the following areas. Check the appropriate box if you can help:

☐ Coach ☐ Assistant Coach ☐ Board Member

Name: __________________________ Phone: __________________________ Email: __________________________

What division are you willing to help? _____________ ☐ Boys ☐ Girls

Child’s name you wish to coach: ____________________________