

FLATHEAD FORCE SOCCER CLUB

PLAYER/PARENT CONTRACT

Name of Player

Team & Coach's Name

Name of Parents/Guardians

Being a member of a Flathead Force team, I understand that the club will involve numerous hours of practice and that we will be traveling outside of the Flathead area for competitive play. I am willing to work on team and club fund raising projects. I also understand that my coach will make demands on my behavior and my time as a club soccer player. The coach has the right to suspend me if I do not meet team requirements. I understand I am expected to be a good citizen-at home, at school, and on the field. I understand that if my team wins a state championship and is eligible to go to the Regional Tournament that I will be required to attend the tournament.

Players Signature

Date

I have read the "Player Agreement" my child has signed above and have read the attached "Rules and Regulations" of the Flathead Force Soccer Club. I understand the competitive nature of the Club and realize the commitment required by myself as a parent and of my child as a member of the team. I am aware of the requirement that teams that win a State Championship and are eligible are required to go to the Regional Tournament.

Parent/Guardian Signature

Date

PlayerParentContract.doc