



USF REAL

Player & Parent

Packet

USF REAL PLAYERS & PARENTS

Players & Parents, the following is a packet to give you the information for the upcoming season. If you have any questions regarding this information, feel free to contact your Coach at any time. This is information to make your player and parenting roles easier and make sure that all of us are on the same page for our season.

1. **Details:** There are several items in this packet for you to reference throughout the year, please have this packet available to you when at all possible. Some items require to be turned in, while others are helpful tips to keep everyone on the same page. Use the Packet to help you!
2. **Player Fees:** We as a team need to decide what our final cost will be for the spring season. Will you be adding things such as: a tournament, training session, winter training, warm-ups, etc.? The Pricing for these things and other things are listed on an attachment. We will go over the attachment together during our team meeting. I would like to hear all questions and concerns.
3. **Uniforms:** Uniform Ordering is done by each individual player online. The ordering process is very simple and explained in the attachment. If there is something you do not understand, please feel free to contact our uniform coordinator or your coach.
4. **Payments:** Please keep up with your payments. The club sets these payments up as a convenience to the parents, while other soccer clubs ask for full payment up front and your spot is not guaranteed till payment is made. If there is a situation where you need an alternate payment plan, you can contact our treasurer and she can help you set that up. (Daretta Eng-djengh@msn.com)
5. We need from every player the following Documents:
 - a. **Copy of birth-certificate**
 - b. **Small Picture for ID Card**
 - c. **Medical Release Form**
 - d. **Copy of Insurance Card**
 - e. **USF Real Code of Conduct**
 - f. **Complete your Registration on GotSoccer**
6. A list of Deadlines is listed for you on certain items:
 - a. Team Meeting: _____
 - b. First week of Training to mark down on calendar is week of: _____
 - c. Uniforms Ordered online at Soccer Village by: _____
 - d. **Documents from number 6 (a-e items) Due by:** _____
 - e. **Complete your Registration on GotSoccer Done By:** _____

USF Real Levels of Player Fees

Base Player Fees

\$350

Fee includes Two Training Sessions per Week,
Registration Fees, League Fees, Referee Fees,
Training Fees, and One Tournament.

À-La-Carte THROUGH CLUB

Additional Weekly Training Session –	\$45.00 x 0 =	\$00.00
Additional Tournament –	\$40.00 x 0 =	\$00.00
Additional Over Night Tournament –	\$50.00 x 0 =	\$00.00

Team Bags – Player Decision	\$24.00 x Online Purchase
Team Training Suits – Player Decision	\$56.00 x Online Purchase

*Paid Directly to Coach:

60-Minute 8-Week Team Winter Training –	\$50.00 x 0 =	\$00.00
90-Minute 8-Week Team Winter Training –	\$65.00 x 0 =	\$65.00

Parents,

The Price above is my minimal suggestion. I would very much like your approval of the above Total for our team. I would further more like your input on what else you may like for our team to participate in this season. I appreciate your being a part of this team and would never want to lose a family due to financial issues. The goal here is to create a good atmosphere for your child and develop his soccer skills by training and playing at the appropriate levels.

Payment Due Dates:


The System in place to pay your USF Real fees will auto deduct for you every month on the date you accept and pay your first deposit.

You can make payments whenever you want in any amounts that you want as long as you keep up with the GENEROUS Payment option that USF REAL provides (many clubs are not this generous). Please keep up with payments and if you need assistance, please contact our treasurer or myself to keep the Soccer team and the player eligible to play.

Thank You,

USF Real

USF REAL Uniform ordering instructions
Online uniform orders must be completed by Deadline given by Coach
(U11-U18 USF REAL Players playing Spring Soccer)

1. Log onto www.soccervillage.com
2. Scroll to the **top right hand corner** and click on link for Soccer Village Clubs Ordering System
3. Select the **USF REAL Logo** 
4. If you are a new user you will be required to register as a user to place orders. You will only be asked to register once. You will be able to place orders for multiple players and/or clubs having registered one time. You will need to provide your email as your username and select a password for your login. ****Do not register using your child's information. A parent or Guardian over the age of 18 must be registered for the order to be accepted****
5. Use your username and password created to log into the ordering module.
6. You will be asked for the group code for your club. The Group Code is : **USF10**
7. You should have a full uniform package of 1 home jersey, 1 away jersey, 1 pair shorts, and 2 socks. These are not included in your fees and will show a total due for you to pay using a credit card online to Soccer Village. More additional items will be available for purchase. Make sure to select the correct size and quantity for all items you are ordering. Leave the items not needed as quantity zero.
8. Select continue to view the items in your shopping cart. Do not fill in a jersey number, the club will provide that detail.
9. Once confirmed the final page will allow you to enter the player's information and team. **You will need to fill out the billing address information and enter your credit card information regardless if purchasing additional items.** Visa, MasterCard and Discover are accepted.
10. All individual orders will be delivered to Carmel store for pick or you can specify for them to be delivered to your address directly.
11. Direct all questions to Uniform Coordinator



Questions or concerns about ordering contact SV Club Services
Brandon Rapp ext 16 email: brandonrapp@soccervillage.com

Online Technical support
Bob Meyer email bob@soccervillage.com

Office hours: Monday through Friday 9am – 6pm
Toll free number 1-800-483-2690 ext 4
In Cincinnati 513-489-5425

USF REAL
Player Registration/Medical Form
Section I – Player Information

Last Name: _____	First Name: _____	MI: _____
Street: _____	City: _____	Zip: _____
Date of Birth: ___/___/___	Home Phone: _____	
Father's Name: _____	Work Phone: _____	
Mother's Name: _____	Work Phone: _____	
Email: _____	Mobile Phone: _____	

Section II – Medical History and Release

Health Insurance Carrier: _____	
Policy Number: _____	
Name of Insured: _____ (Please photocopy both sides of your insurance card and attach a copy)	
Comments: (please include any information you would like to share with coach in the case of a medical emergency (i.e. allergies, current medications, conditions, etc). _____ _____ _____	
<p>I, a parent or guardian of the player named in Section I, who is a participant in the activities of the USF REAL Soccer Club, hereby give my consent and approval to my child's participation in the activities of the USF REAL. I assume all risks and hazards incidental to my child's participation and hereby release, indemnify, and hold harmless the USF REAL, Indiana Youth Soccer Association, United States Youth Soccer Association, United States Soccer Association and organizer, supervisors, coaches, managers and agents of those organizations from any liability, claims, and damages arising out of my child's participation in the activities of the USF REAL. I additionally waive, to the extent not covered by liability insurance, any liability, claims or damages against any person transporting my child to or from said activities. I understand that it is my responsibility to satisfy myself that my child is in satisfactory physical condition to participate in the activities of the USF REAL. In the event that my child becomes injured or ill during any practice, game, or tournament games while traveling to or from any practice, game or tournament game while a participant in the activities of the USF REAL, I authorize the child's coach, or his representative, to secure first aid, and/or the services of any physician, dentist or hospital and I agree to assume all financial obligations incurred therewith.</p>	
Signature: _____	Date: _____

Subscribed and sworn to before me, a notary public, in and for said county and state this ____ day of _____
State of Indiana,
County of _____ SSN: _____

My Commission expires: _____

Notary Public; _____

County of Residence _____

Printed Name: _____

USF REAL Codes of Conduct

Please read and sign in the appropriate section of the Code of Conduct. (Parents, please both sign.) Return the signed copy to your coach and keep one for your records.

Thank you,

USF REAL Board of Directors

Players Code of Conduct:

I pledge to accept responsibility for my USF REAL experience by following this Players' code of Conduct:

1. I will demonstrate fair play and sportsmanship at every practice, game and tournament. I will also encourage fair play and good sportsmanship from others.
2. I will attend every practice and game that I can, and will notify my coach or team manager if I cannot be present at a practice, game, or tournament.
3. I understand that playing time in games not guaranteed and is determined by my attendance, attitude and performance at practice sessions.
4. I will treat other players, coaches, officials and fans with respect regardless of race, sex, or ability, and I will expect to be treated accordingly.
5. I deserve to play in an environment that is free of drugs, including tobacco and alcohol and will expect adults to refrain from their use at all practices and games.
6. I will encourage my parents to be involved with my team in some capacity because it is important to me.
7. I understand that I am representing USF REAL. Poor behavior during practices, games or tournaments may result in lost playing time and expulsion from the team.

Parents Code of Conduct:

I pledge to accept responsibility for my actions by following this Parent's Code of Conduct:

1. **I will NOT be a sideline coach or referee. I will limit my comments to positive reinforcement and encouragement to my child and his/her teammates.**
2. I will encourage fair play and good sportsmanship by demonstrating positive support for all players, coaches, and officials at every practice, game, and tournament.
3. I will place the emotional and physical well-being of my child ahead of a personal desire to win.
4. If my child develops a behavior-related problem that repeatedly disrupts practices and/or games, I promise to work with my child's coach to resolve that problem.

5. I will not sit or stand on the coaches' and players' sideline during a match, unless invited by the coach.
6. I will demand a soccer environment for my child that is free of drugs, including tobacco and alcohol, and will refrain from their use at all practices and games.
7. I will do my very best to make soccer fun for my child.
8. I promise to treat other fans, coaches, players, and officials with respect, regardless of race, sex, or ability.
9. I will remember that as a fan, I represent USF REAL. I understand that any concerns about officiating and/or coaching during a game must be directed to the team manager or field marshal. I also understand that poor behavior during practices, games or tournaments may result in expulsion from the soccer complex (I must wait inside or next to my car in the parking area for my son or daughter). If this occurs, it may result in expulsion from the club.

.....
Player

I _____(print name) have read and agree to follow the Code of Conduct set forth by this document.

_____signature _____date

.....
Parent

I _____(print name) have read and agree to follow the Code of Conduct set forth by this document.

_____signature _____date

.....
Parent

I _____(print name) have read and agree to follow the Code of Conduct set forth by this document.

_____signature _____date

Team Name: _____

In consideration of the furtherance of your purposes, objectives and aims, and in consideration of your permitting me to participate in your tournament, on behalf of myself, my heirs, executors, administrators and assigns, I hereby waive and release any and all rights and claims for damages which I may have against any, Tournament or Tournament Host Club, as well as any other person, sponsors, organizations or corporation, their heirs, executors, administrators, and assigns who are providing services or assistance as a result thereof. Release form must be signed by a parent/guardian.

1.	_____ Signature of Parent/Guardian	_____ Player's Name
2.	_____ Signature of Parent/Guardian	_____ Player's Name
3.	_____ Signature of Parent/Guardian	_____ Player's Name
4.	_____ Signature of Parent/Guardian	_____ Player's Name
5.	_____ Signature of Parent/Guardian	_____ Player's Name
6.	_____ Signature of Parent/Guardian	_____ Player's Name
7.	_____ Signature of Parent/Guardian	_____ Player's Name
8.	_____ Signature of Parent/Guardian	_____ Player's Name
9.	_____ Signature of Parent/Guardian	_____ Player's Name
10.	_____ Signature of Parent/Guardian	_____ Player's Name
11.	_____ Signature of Parent/Guardian	_____ Player's Name
12.	_____ Signature of Parent/Guardian	_____ Player's Name
13.	_____ Signature of Parent/Guardian	_____ Player's Name
14.	_____ Signature of Parent/Guardian	_____ Player's Name
15.	_____ Signature of Parent/Guardian	_____ Player's Name
16.	_____ Signature of Parent/Guardian	_____ Player's Name
17.	_____ Signature of Parent/Guardian	_____ Player's Name
18.	_____ Signature of Parent/Guardian	_____ Player's Name

Registering for USF Real

This is a very important step for your athlete and the only way to guarantee your athlete is on a team and is able to play soccer in the upcoming season. This should be at the top of your list as a priority to get done today.

STEP 1: Follow the following SPECIFIC link to USF REAL's GotSoccer Log In for your athlete. Step 1 will take you to Step 2.

<https://www.gotsport.com/asp/application/reg/?ProgramID=5155&Type=PLAYER>

STEP 2: Log in using your Got Soccer Log In using the **Individual Users- Existing Account** as seen below on the left. If you have forgotten your Log In, simply click the **Player Password Lookup** link as shown below on the left. ONLY IF YOU ARE NEW TO GOTSOCCER should you use the **Individual Users-New Account** as shown on the right to create a new account. If you are unsure if you have an account or not, GotSoccer will alert you if you do as you create an account as shown on the right.

Individual Users - Existing Account

Enter your Account Username & Password below:

Username

Password

Forgotten your username or password?
[Player Password Lookup](#)

Individual Users - New Account

If you are new to the GotSport system, enter your desired username and password below and an account will be created for you.

Gender Male Female

Date of Birth (mm/dd/yyyy)

First Name

Last Name

Create a Username

Create a Password

Confirm Password

STEP 3: Follow the GotSoccer Process and make sure all information is filled in as you go through the steps that GotSoccer requires. Player Registration steps 2 & Step 3 in GotSoccer requires you to set up your payment plan and put in your credit card. Please be sure this gets done as it is the acceptance towards your upcoming season for your team.

Step 4: If you have any questions please do not hesitate to contact your Coach or Manager.

The following is the finished statement you receive in the printable form you can choose to print out.

Thank you for registering for USF Real travel soccer. We are looking forward to having a great season full of fun and soccer development.

Your next steps are as follows

- 1) You will be required to fill out and return a notarized medical release form to your team manager. This is in addition to the medical information provided online as it is needed by the state for tournament play.
- 2) If you are a new player to USF Real you will need to provide an official copy of your players birth certificate to your team manager.
- 3) New Players: Your next step will be to go online and order your players uniform. The link to the USF Real ordering process can be found on the website or will be provided in a future communication. The uniform includes two jerseys, one pair of shorts, and two pairs of socks. You may order additional equipment if desired. The uniform fee is separate from the registration fees.

The fees include the appropriate league fees, one tournament, and training twice a week during the season. These fees are only for the Spring 2010 season. Additional fees may be required depending on the team.

I understand that USF will deduct said fees from my credit card or checking account on the schedule that was provided.

Payment Option: One Time payment \$350 - deducted at day of registration

Multi Payment option 1: \$50 - deducted on day of registration + \$100 on the 15th of January, \$100 on the 15th of February, and \$100 on the 15th of March.

Multi Payment option 2: \$50 - deducted on day of registration + \$50 on the 15th of the month from December to May

Field Map/Directions

Brandywine Park

Driving directions:

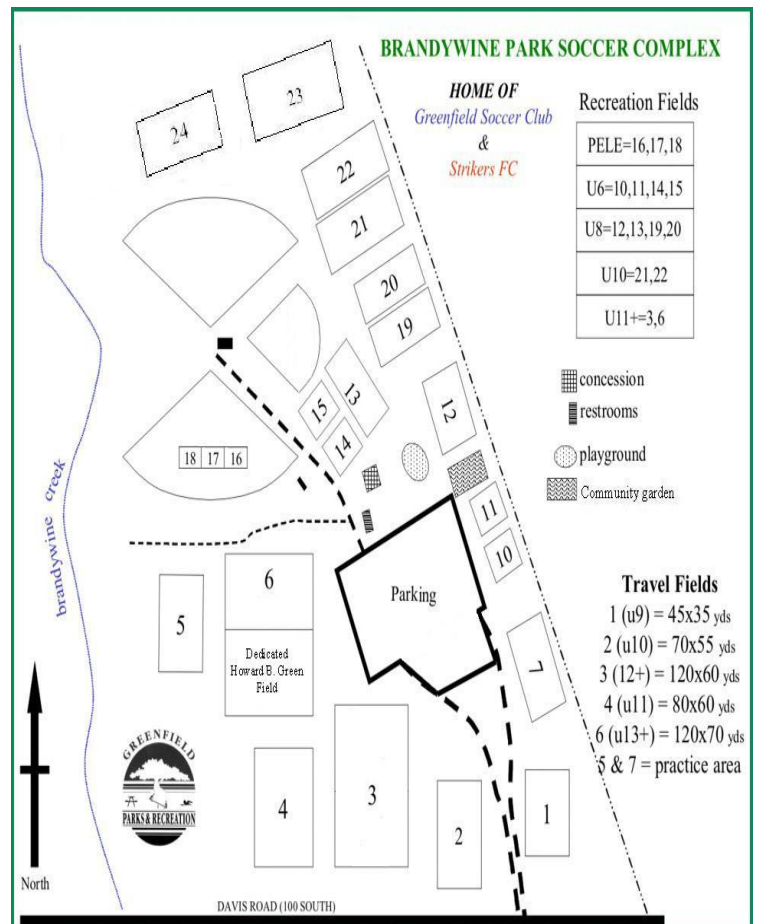
From the West or East: I-70 to Greenfield Exit (State Rd 9). Go South on St Rd 9 (approximately 2.5 miles) through town (you will cross Hwy 40 and go by Courthouse on left) You will go approximately 1 mile after crossing 40 turn left at the Village Pantry onto Davis Road (it will appear that you are leaving town). Proceed East on Davis Road and go across a small bridge and you will see soccer fields on the left side of the road.

From the West or East: Hwy 40 to Greenfield. Go to intersection of State Rd 9 (Courthouse at intersection). Turn South and go approximately 1 mile. Turn left (onto Davis Rd) at the Village Pantry. Proceed East on Davis Road and go across a small bridge and you will see soccer fields on the left side of the road.

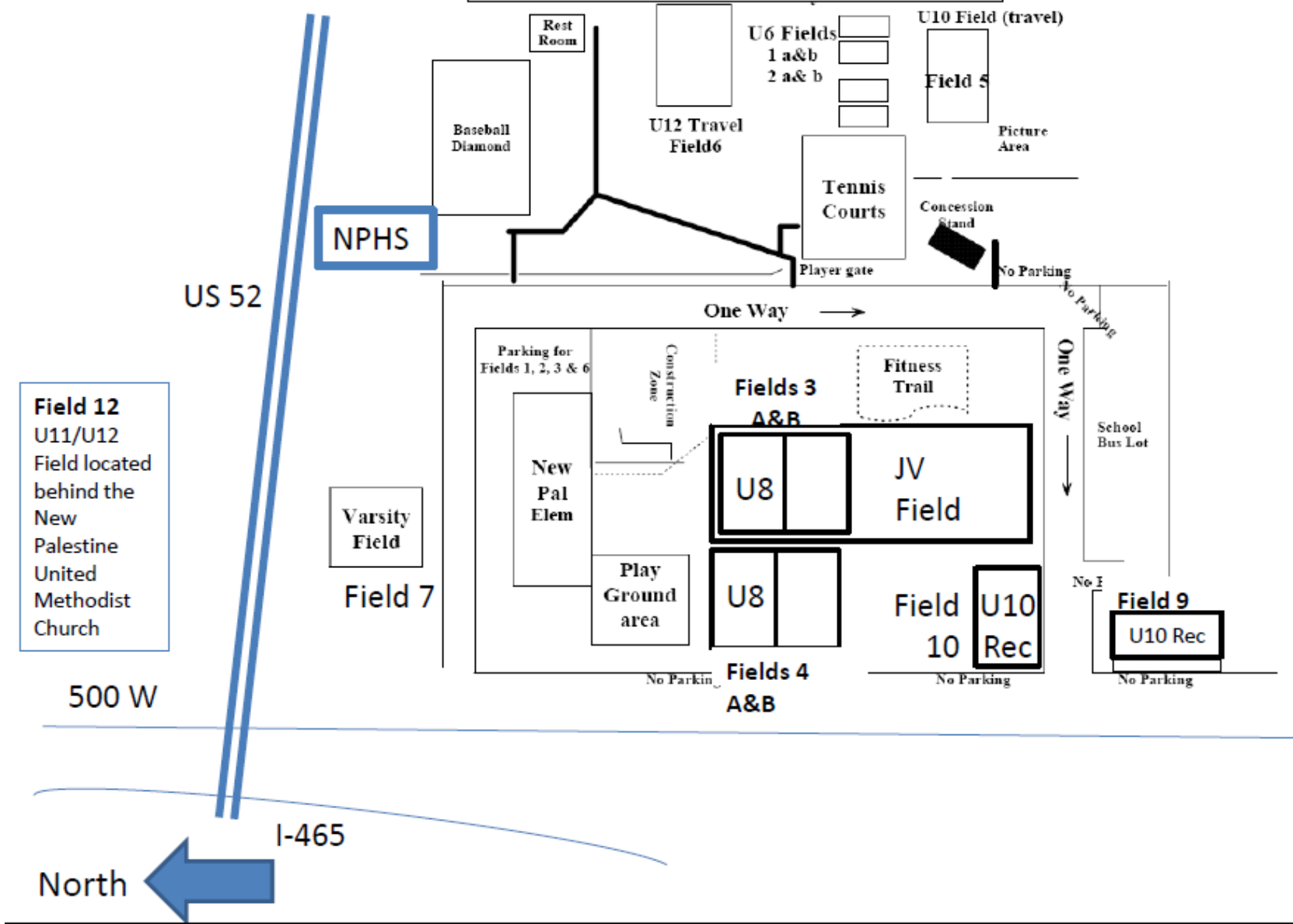
From South: State Road 9 to Davis Road (There will be a Village Pantry on the Northwest corner of 9 & Davis Road). Turn right and proceed East on Davis Road. Go across a small bridge and you will see soccer fields on the left side of the road.

From North: Go South on St Rd 9 (approximately 2.5 miles I-70 and 9 intersection) through town (you will cross Hwy 40 and go by Courthouse on left). You will go approximately 1 mile after crossing 40. Turn left at the Village Pantry onto Davis Road (it will appear that you are leaving town). Proceed East on Davis Road and go across a small bridge and you will see soccer fields on the left side of the road.

[Mapquest Location of Brandywine park](#)



New Palestine Fields Layout



Indianapolis
East Side Soccer Fields

Indianapolis Soccer Fields (Field Address)

937 South German Church Road

Indianapolis, IN 46239

Contact Phone:
(317)222-1995



USF Real

Financial Assistance

Program

Dear Parent,

Instructions for Applying for Financial Assistance

There are three sections of this packet. Section 1, pages 3-6, is the League Scholarship for Boys, Section 2, pages 7-10, is the League Scholarship for Girls, and Section 3, pages 11-12, is the Clubs Scholarship. If your player competes in ISL, there is no league application, thus you'll only be able to fill out Section 3 of this packet.

Step 1 (If for an ISL player, please move on to Step 2): Print off the appropriate League Application, either Boys (Section 1) or Girls (Section 2), and then Please fill out the following of your respective document:

Page 1:

Name of Applicant
Name of person filling out form
Your Phone
Relationship to Applicant
Your Email
Applicant's Parents Name(s)
Applicant's Home Address
City
Zip
Phone

Page 2:

Fill out the **Confidential Family Financial Information** Section

In this section when you get to the question

Do you presently take advantage of any club financial assistance programs? You may say **Yes** and put **Concession Stand Sales**. Time spent in the Concession Stand will be one of the first options to compensate for fee assistance from the club.

Step 2: Print off the Club Application for Financial Assistance and complete Part One and Part Two.

Step 3: Once you fill out your portions of this Application Packet, you may mail the form to the USF Real Finance Committee or physically hand the form to Coach Pineda, and we will take care of filling out the rest of the form.

USF Real - Financial Committee
Scholarship Application
1547 North State Street #178
Greenfield, IN 46140

We hope this information is helpful to you!

Thank you!
~USF Real Soccer Club

BOYS

Central Indiana

Youth Soccer League

Allen Katner Memorial

Scholarship Fund

One of the driving forces in Allen Katner's life was his desire that, regardless of financial circumstances, all young soccer players have opportunities to develop their skills, talents, love and appreciation for the game. The Allen Katner Memorial Soccer Scholarship Fund has been established to ensure that Dr. Katner's desire be continued. Over the past several years, we have given out numerous scholarships to deserving youths.

The mission of this fund is to assist young soccer players who may be denied an opportunity to grow and develop in the sport of soccer due to a lack of financial resources. These barriers to opportunities may arise in the form of expenses for membership on a travel team, the tuition for attending a select or community soccer camp, tournament expenses, the cost of attending coaching clinics, and so forth.

Eligibility will be limited to youth players, under the age of 20, who live in the Central Indiana area. We expect that requests will first be forwarded to the club for whom the player plays and should be reviewed by the respective Club Scholarship Committee. No requests by parents or players should be sent directly to the Katner Fund. All requests to this fund must come through the parent organization first. Financial aid that cannot be met by the Club Scholarship Committee will then be reviewed by the Katner Fund Scholarship Committee. Decisions relating to the awards from the Memorial Fund will be made by Katner Memorial Scholarship Committee. Requests should be made in writing, briefly explaining the circumstances behind the request.

Allen Katner Memorial Scholarship Fund SCHOLARSHIP REQUEST FORM

Fall Applications must be received by **October 31**

Spring Applications must be received by **May 1**

PLEASE REFER TO THE UPDATED SCHOLARSHIP PROGRAM INFORMATION ON PAGE 3 BEFORE COMPLETING AND SUBMITTING FORM

Date of application: _____ Have you requested aid before? Yes/No Amt Last Rec'd: _____
Current Season: Fall Spring, Year: _____ Number of Seasons Played: _____
Team applicant is on: _____ Age Level: _____
Club Applicant is associated with: _____
Club President's Name: _____ Phone: _____
E-Mail: _____ Club Address: _____ Zip: _____
Name of Applicant: _____
Name of person filling out form: _____ Your Phone: _____
Relationship to Applicant: _____ Your E-Mail: _____
Applicant's Parents Name(s): _____
Applicant's Home Address: _____
City: _____ Zip: _____ Phone: _____

CONFIDENTIAL SCHOLARSHIP WORKSHEET

To be filled out by Applicant's Club President or Executive Board Member

Breakdown of Applicant's Expected Soccer Fees (CURRENT SEASON ONLY):

Applicant will owe \$ _____ for Coaching
Applicant will owe \$ _____ for Field usage or Field Equipment Fees
Applicant will owe \$ _____ for League Fees (Paid to IYSA, G.I.R.L.S. for Registration Etc.)
Applicant will owe \$ _____ for Club Fees (Include Administrative and Insurance Fees)
Applicant will owe \$ _____ for Officials/Referees
Applicant will owe \$ _____ for _____ (Other)

Name of Person that completed fee section: _____

Club President/Executive Board Member Signature: _____

Title: _____

Is Club awarding scholarship to this applicant? _____

If you answered yes, please provide club award amount _____

Please return completed form to: Mike R. Ireland

**605 Ohio St. Suite 316,
Terre Haute, IN. 47807**

Total Applicable Fees Due: \$

CIYSL SCHOLARSHIP REQUEST FORM- PAGE 2

Program Summary:

Central Indiana Youth Soccer League is pleased to offer a scholarship program for soccer athletes who are in need of financial assistance in order to play in the CIYSL League. Each scholarship request will be considered on a per season basis. See complete program description on page 3.

Confidentiality:

All scholarship information is for the sole purpose of helping the CIYSL Scholarship Committee decide who the most needy individuals are for a particular season. These scholarship requests are strictly confidential and will not be shared with anyone other than the applicant's Team Manager (if applicable), the applicant's Club President or Executive Board Member.

Please return completed form to: **Michael R. Ireland**
605 Ohio Street, Suite 316,
Terre Haute, IN. 47807

DO NOT WRITE IN THIS SPACE! FOR CIYSL Scholarship Committee ONLY!

Scholarship Denied

Reason: _____

Scholarship Approved

Amount Awarded \$ _____ Check # _____ Date Sent _____

Sent to: _____ Club

CONFIDENTIAL FAMILY FINANCIAL INFORMATION

How much of the fees can you afford to pay? _____

Do you own or rent your home? _____ Number of wage earners in household? _____

Employed Full/Part-Time Receive Unemployment? Yes/No _____ Receive Support? Yes/No _____

Number of persons living in the household: _____ # Adults _____

Children (school age) _____ # Children (under school age) _____

Do you qualify for free or reduced lunch program (yes/no): If yes, what percent? _____

Do you qualify for other public assistance? Yes/No Food Stamps? Yes/No

Do you presently take advantage of any club financial assistance programs (script, candy sales, volunteer at concerts, sporting events, etc.)? Yes/No

If yes, which ones? _____

If not, why? _____

Briefly describe why Financial Aid is being requested at this time. If more space is needed, continue on back.

CIYSL SCHOLARSHIP PROGRAM

INSTRUCTIONS

All registered players in the CIYSL league are eligible.

Players from any team participating in the CIYSL League, whose team is in good standing, may request financial assistance from the CIYSL Scholarship Program. The completed request form must be given to your club president or an executive board member of the club for approval before submitting it to CIYSL for consideration.

If special circumstances exist, a team manager may also submit applications to your club anonymously.

Incomplete applications will not be considered and may be returned.

Clubs must provide a complete breakdown of the Applicant's Expected Soccer Fees for one season. Applications will be returned to clubs if the expected fees are submitted as a lump sum or full year fees are submitted.

Scholarship candidates should fill out an application and submit it to their team manager, Club President, or a member of the Club's Executive Board prior to the beginning of League play for the spring or fall season. The CIYSL Scholarship Committee will review all application(s) and approve any request(s) based upon the information provided in the application. Applications for **spring** season must be received by **May 1** and for **fall** season by October 31.

PROGRAM DESCRIPTION: Central Indiana Youth Soccer League is pleased to offer a scholarship program for soccer athletes who are in need of financial assistance in order to play in the CIYSL League. Each scholarship request will be considered on a per season basis for coaching, club base fees, field usage or field equipment fees, officials or referee fees, league fees and other fees deemed acceptable by the CIYSL Scholarship Committee.

The following fees will not be considered for scholarship awards: coaches travel expenses, uniform expenses, player/family travel expenses, tournament fees, camp or clinic fees.

Scholarship applicants are expected to meet the volunteer commitment required by their travel soccer club during the season for which the scholarship is granted.

Requests should be made through your team manager who will review the request and will submit it to your club president or an executive board member of the club for their signature and review.

The application will then be presented to CIYSL Scholarship Committee.

Fee assistance is not guaranteed with the submission of this scholarship request.

CONFIDENTIALITY: All scholarship information is for the sole purpose of helping the CIYSL League to award scholarships to athletes in need of financial aid. These scholarship requests are strictly confidential and will not be shared with anyone other than the CIYSL Scholarship Committee.

Revised 01/04/2005

GIRLS

**Greater Indiana
Regional League of
Soccer**

GIRLS SCHOLARSHIP REQUEST FORM

*Fall Applications must be postmarked by **August 1st***

*Spring Applications must be postmarked by **February 1st***

PLEASE REFER TO THE UPDATED SCHOLARSHIP PROGRAM INFORMATION ON PAGE 3 BEFORE COMPLETING AND SUBMITTING APPLICATION

Date of application: _____ Have you requested aid before? Yes/No Amt Last Rec'd: _____
Current Season: Fall Spring, Year: _____ Number of Seasons Played: _____
Team Name: _____ Age Level: _____
Club Name: _____
Name of Applicant: _____
Name of person filling out form: _____ Your Phone: _____
Relationship to Applicant: _____ Your E-Mail: _____
Applicant's Parents Name(s): _____
Applicant's Home Address: _____
Applicant's City: _____ State: _____ Zipcode: _____

EXPECTED CLUB FEES SECTION

To be filled out by Applicant's Club President or Executive Board Member

Breakdown of Applicant's Expected Soccer Fees (CURRENT SEASON ONLY):

Applicant will owe \$ _____ for Coaching
Applicant will owe \$ _____ for Field usage or Field Equipment Fees
Applicant will owe \$ _____ for League Fees (Paid to IYSA, GIRLS for Registration Etc.)
Applicant will owe \$ _____ for Club Fees (Include Administrative and Insurance Fees)
Applicant will owe \$ _____ for Officials/Referees
Applicant will owe \$ _____ for _____(Other)

Name of Board Member completing fee section: _____
Club President/Executive Board Member Signature: _____
Club Position/Title: _____
Is Club awarding scholarship? _____ If answered yes, award amount: _____
Club President's Name: _____ Phone: _____
E-Mail: _____ Club Website: _____
Club Address (address to mail check): _____
City: _____ State: _____ Zip: _____

**Please return completed form to: Amy Fistrovich,
10663 Young Lake Drive,
Indianapolis, IN 46239**

GiRLS SCHOLARSHIP REQUEST FORM . Page 2

CONFIDENTIAL FAMILY FINANCIAL INFORMATION

How much of the fees can you afford to pay? _____ Income: \$ _____
Do you own or rent your home? _____ Number of wage earners in household? _____
Adults Employed Full Time: _____ # Employed Part-Time: _____
Receive Unemployment? Yes No Receive Support? Yes No
Number of persons living in the household: _____ # Adults _____
Children (school age) _____ # Children (under school age) _____
Do you qualify for free or reduced lunch program: Yes No If yes, what percent? _____
Do you qualify for other public assistance? Yes No Food Stamps? Yes No
Do you presently take advantage of any club financial assistance programs (script, candy sales, volunteer at concerts, sporting events, etc.)? Yes No
If yes, which ones? _____

If not, why?

Briefly explain why Financial Aid is being requested at this time (change in employment, medical event, change in family status, etc.). If more space is needed, continue on back.

DO NOT WRITE IN THIS SPACE! FOR GIRLS EXECUTIVE BOARD ONLY!

Scholarship Denied

Reason: _____

Scholarship Approved

Amount Awarded \$ _____ Check # _____ Date Mailed: _____

Mailed to: _____ Club

Mailed to: _____ Parent/Guardian

GiRLS SCHOLARSHIP REQUEST FORM . Page 3

INSTRUCTIONS

All registered players in the GIRLS league are eligible.

Players from any team participating in the GIRLS league, whose team is in good standing, may request financial assistance from the GIRLS Scholarship Program. The completed request form must be given to your club president or an executive board member of the club for completion of the expected club fees section and approval before submitting it to GIRLS for consideration.

Checks for approved requests will be mailed to each applicant's club president, treasurer, or club administrator along with a letter detailing who received the award. The GIRLS league will also send a letter to the applicant's parent or guardian informing them of the award.

If special circumstances exist, a team manager or club representative may submit applications anonymously.

Incomplete applications will not be considered and may be returned.

Clubs must provide a complete breakdown of the Expected Club Soccer Fees for one season. Applications will be returned to clubs if the expected fees are submitted as a lump sum or full year fees are submitted.

Scholarship candidates should fill out an application and submit it to their team manager, Club President, or a member of the Club's Executive Board prior to the beginning of league play for the spring or fall season. The GIRLS Executive Board will review all application(s) and approve any request(s) based upon the information provided in the application. Applications for Spring season must be received by February 1st and for Fall season by August 1st.

PROGRAM DESCRIPTION: The Greater Indiana Regional League of Soccer (GIRLS) is pleased to offer a scholarship program for female soccer athletes who are in need of financial assistance in order to play in the GIRLS league. Each scholarship request will be considered on a per season basis for coaching, club base fees, field usage or field equipment fees, officials or referee fees, league fees and other fees deemed acceptable by the GIRLS Executive Board.

The following fees will not be considered for scholarship awards: coaches travel expenses, uniform expenses, player/family travel expenses, tournament fees, camp or clinic fees.

Scholarship applicants are expected to meet the volunteer commitment required by their travel soccer club during the season for which the scholarship is granted.

Requests should be made through your team manager who will review the request and will submit it to your club president or an executive board member of the club for their signature and review.

Mail completed applications to the GIRLS league, in care of: Amy Fistrovich,
10663 Young Lake Drive,
Indianapolis, IN 4629.

Fee assistance is not guaranteed with the submission of this scholarship request.

CONFIDENTIALITY: All scholarship information is for the sole purpose of helping the GIRLS Executive Board award scholarships to athletes in need of financial aid. These scholarship requests are strictly confidential and will not be shared with anyone other than the applicant's Team Manager (if applicable), the applicant's Club President or Executive Board Member, and the GIRLS Executive Board.

Updated 11/19/10

USF Real Club Application for Financial Assistance

Program Description:

USF Real Soccer Club offers a fee assistance program for youth soccer participants, who are in need of financial assistance, in order to play soccer in the USF Real Travel Program. Eligibility is determined seasonally for club fees only. One application needs to be completed per family but list all children playing and their division. Applications must be submitted on/or by your team's first practice session. The amount of assistance given to each player is determined on an individual basis.

***Additional volunteer time is expected by the USF Real for families receiving scholarships.**

Families will be informed of the different volunteer opportunities at the beginning of each season by letter or e-mail. This could include working additional shifts in the concession stand, assist in maintaining the fields for opening and closing of season, or any other assignments identified by the USF Real Board of Directors or the Director of Coaching and Player Development.

Confidentiality:

All information is for the sole purpose of assisting the USF Real Financial Committee to make scholarship decisions. Family information is **strictly confidential** and will not be shared with anyone other than the USF Real Board of Directors, Financial Committee, and chairpersons overseeing volunteer positions within the USF Real Soccer Club and its Partners in Soccer, E.S.S.A./Indy Force, NPUnited, and Greenfield Area Soccer Club.

Only completed applications with supporting documentation will be considered by the USF Real Financial Committee. Applications can be mailed to:

USF Real - Financial Committee
Scholarship Application
1547 North State Street #178
Greenfield, IN 46140

Part One:

Player Applicant(s): _____
Travel Team: U _____
Home Address: _____
City: _____ Zip Code: _____
Person completing form: _____
Relationship to applicant: _____
Email: _____
Reason for requesting scholarship: _____

Part Two:

All information must be completed below.

Player Applicant(s): _____

Home Address: _____

City: _____ Zip Code: _____

List all living in the household (including all adult/children):

1) _____	4) _____	7) _____
2) _____	5) _____	8) _____
3) _____	6) _____	9) _____

List all individuals and relationship to applicants who are working in the household:

- 1) _____ Relationship: _____
- 2) _____ Relationship: _____
- 3) _____ Relationship: _____
- 4) _____ Relationship: _____

*Monthly Income (wages): \$ _____ (two most current and consecutive pay stubs)

*Unemployment: \$ _____

*Public Assistance: \$ _____ (Food Stamps, SSI, and Disability)

*** indicates supporting documentation must be included with application for all members of the family.**

Family requesting: Check which applies ___ Full Fee Assistance

___ Partial Fee Assistance

Total Amount Requesting: \$ _____

I certify and affirm the above information is correct and complete to the best of my knowledge. I agree to inform USF Real Soccer Club of any changes in my income, family size, or ability to pay. I understand incomplete information could jeopardize eligibility for financial scholarships. I understand USF Real, its Board of Directors, coordinators, coaches, volunteers and team managers; make no promise or assurance of financial assistance. Determination is based on several factors and by the USF Real Financial Committee.

Applicant Signature

Date

Part Three (Club use only):

Amount awarded by USF Real: \$ _____

Parent Contribution: Check one ___ No ___ Yes

\$ _____ (\$ _____ per month _____ months)

Financial Committee Signature

Date

USF Real

Director of Coaching and Player Development

The Director of Coaching is in charge of all things related to the development and management of the USF Real Coaching Staff. The DOC provides professional guidance regarding player development and program implementation that are appropriate for the different age and developmental stages of players within the USF Real soccer program. The DOC works with the coaching staff to establish the needs of the individual teams and individual players.

The Director of Coaching also serves as an advisor to the USF Real Board of Directors. The DOC attends monthly Board of Director meetings and other meetings as required. The DOC is responsible for coaching and player development and expected to delegate, monitor and adjust the use of associates, volunteers and identify staff as needed.

The Director of Coaching will also design and implement a Parent Education Program. The DOC will be involved in Fundraising and Sponsorship Programs as well as Budget Meetings.

August 2010 Press Release

The USF Real Club is proud to announce Gilberto Pineda, Jr. has been hired as Director of Coaching and Player Development. The club is looking forward to the positive impact of having a seasoned local coach work with the club to develop the players and coaches.

Gilberto brings over 12 years of coaching experience and a dedicated passion for the game of soccer. He has a proven track record for developing players and teams to perform to the best of their ability.

Gilberto's background includes multiple years of leading Premier, Division 1 and Division 2 girls and boys teams to great success.

Gilberto is also the Varsity Assistant Coach of North Central High School Women's team and Coach of the North Central High School Women's Junior Varsity team. In the past Gilberto has also served as the head coach of the New Palestine High School boys Junior Varsity team and the Assistant Coach for the New Palestine High School Varsity team.

Gilberto will be working with each team and the coaching staff to deliver a structured training program geared to help players excel in both life and the game of soccer, developing into potential collegiate prospects and positive contributors to society.

GILBERTO PINEDA, JR.



Objective

My goal is to provide a safe and fun environment for youth to excel in both life and the game of soccer developing into potential collegiate prospects and positive contributors to society.

Education

Indiana University Bloomington, IN
Bachelor of Science in Kinesiology December 2006
Major: Sport Communication-Broadcast
Minors: Telecommunications and Business

Indiana Youth Soccer Indiana
USSF National D License March 2008

National Soccer Coaches Association of America Indiana
Director of Coaching Diploma November 2010

Coaching Experience

Director of Coaching and Player Development August 2010 through Present
USF Real East Indianapolis, IN

Head Coach September 2009 through Present
USF Real `94 Women – 1 Season East Indianapolis, IN
• Indiana Soccer League 1st Division – 1 season

Varsity Assistant Coach/Junior Varsity Coach June 2009 through Present
North Central High School Women's Soccer – 2 Seasons Indianapolis, IN

Head Coach June 2008 through Present
USF Real (Greenfield Strikers FC) `96 Girls – 4 Seasons Greenfield, IN
• Indiana Soccer League 2nd Division – 1 season
• Indiana Soccer League 1st Division – 1 season
• G.I.R.L.S. League Premier Division -2 seasons

Head Coach February 2008 through June 2010
Greenfield Strikers FC `96 Boys – 5 Seasons Greenfield, IN
• CIYSL 1st Division – 4 seasons
• CIYSL 2nd Division – 1 season

Varsity Assistant Head Coach/Junior Varsity Coach June 2007 through February 2009
New Palestine High School Boys Soccer – 2 Seasons New Palestine, IN

Head Coach June 2006 through June 2008
NPUnited `94 Lady Dragons – 4 Seasons New Palestine, IN
• G.I.R.L.S. League 1st Division – 2 seasons
• G.I.R.L.S. League 2nd Division – 2 seasons

Head Coach September 1998 through May 2002
NPUnited U-10 Recreational – 8 Seasons New Palestine, IN

Playing Career

Place Kicker/Punter February 2003 through August 2003
Indiana University Football Bloomington, IN

Two-Year Co-Captain and Four-Year Letter Winner 1998 through 2001 Seasons
New Palestine High School Varsity Boys Soccer Team New Palestine, IN

E.S.S.A. Recreational League at age 3 Greenfield Recreational League
Indy Force Cobras Greenfield Strikers FC

**Activities
and
Leadership
Experience**

<i>Coaching Committee Member</i> Greenfield Strikers FC	February 2009 through Present Greenfield, IN
<ul style="list-style-type: none">• Member of a 3-person committee in charge of guiding the direction of coach and player development.	
<i>President</i> USF Real	April 2010 through August 2010 East Indianapolis, IN
<i>Vice-President</i> USF Real	January 2010 through April 2010 East Indianapolis, IN
<i>Voting Board Member-at-Large</i> USF Real	Spring 2008 through January 2010 East Indianapolis, IN
<i>Peer Mentor</i> Fitness and Wellness Center at Briscoe Quadrangle	August 2003 through May 2004 Bloomington, IN
<ul style="list-style-type: none">• Instructed a Fitness and Wellness course, U211, was a source for campus knowledge,• Assisted freshmen and new students with advice on college life and the transition from high school• Provided assistance and education with weight training and physical fitness in workout facility	

