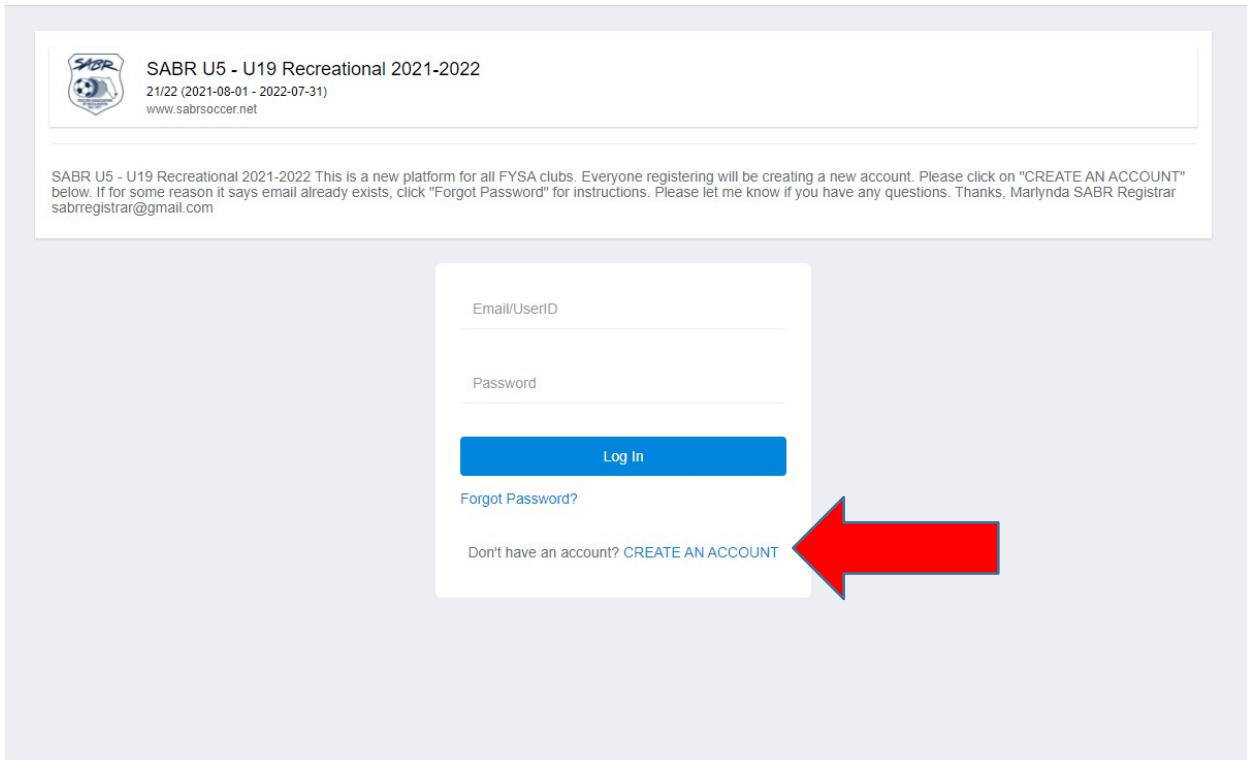
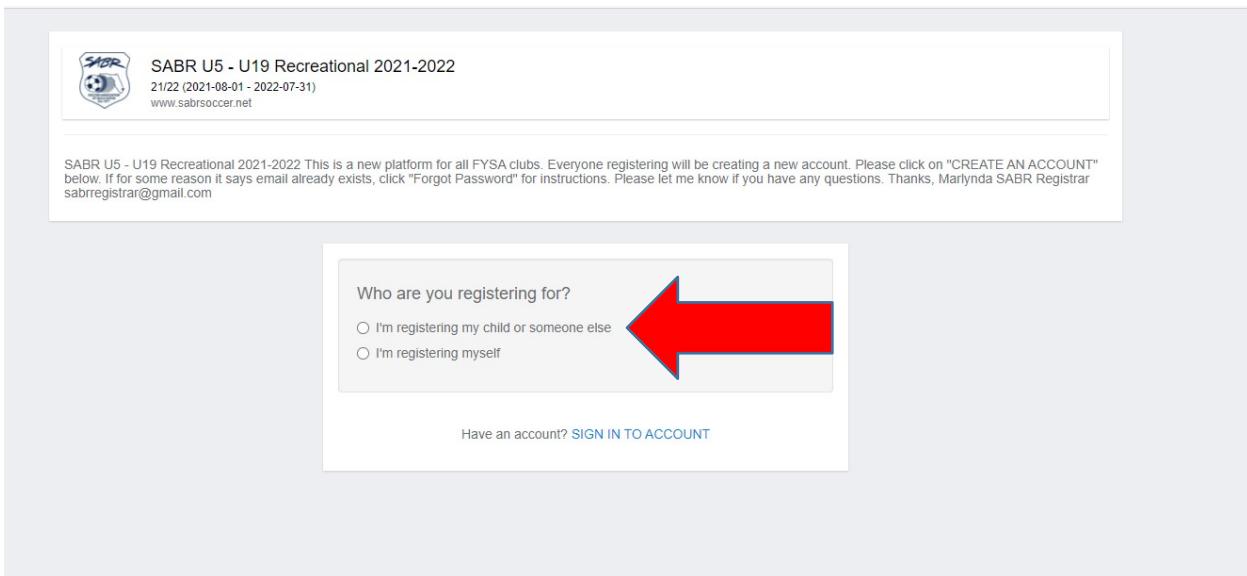


SABR and Florida Youth Soccer are now using the Got Sport platform to register players.

Everyone needs to “CREATE AN ACCOUNT”



Everyone will be “registering my child or someone else”



Please enter your child's information here:

Who are you registering for?

- I'm registering my child or someone else
- I'm registering myself

Registrant's Information

Fill out the information for the person you are registering

Registrant's Legal First Name

Registrant's Legal Last Name

Registrant's Birthdate

Registrant's Gender

Enter "Your" information Parent/Guardian

Your Information

Fill out your information

First Name*

Last Name*

DOB

Gender

Preferred Language

Phone number

Mobile Phone Number

Address

Address (Continued)

City

State/Province

Postal Code

Country

Time Zone Name

Create your UserID and Password – this is the parent/guardian primary email address

GotSport Account

Create your GotSport account with your email and password

Email/UserID*

Password*

Sign Up

Register the player that you created!

SABR U5 - U19 Recreational 2021-2022
21/22 (2021-08-01 - 2022-07-31)
www.sabrsoccer.net
✉ Marlynda Comiskey

Cart (0)

SABR U5 - U19 Recreational 2021-2022 This is a new platform for all FYSA clubs. Everyone registering will be creating a new account. Please click on "CREATE AN ACCOUNT" below. If for some reason it says email already exists, click "Forgot Password" for instructions. Please let me know if you have any questions. Thanks, Marlynda SABR Registrar
sabrregistrar@gmail.com

Register

Click the "Register" button to register that person. If you want to register someone that is not in this list, click "Add Family Member".

Add Family Member

 Marlynda Comiskey sabrregistrar@gmail.com

 Stormy Day

Verify player information and add email address for child if applicable

 SABR U5 - U19 Recreational 2021-2022
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Cart (0)

Profile Parents Emergency Info Registration Payment Features

Stormy Day
[Change User](#)

*Denotes Required Field

Photo
 [Choose File](#) No file chosen

Player Legal First Name*	Middle Name	Player Legal Last Name*	Suffix
<input type="text" value="Stormy"/>	<input type="text"/>	<input type="text" value="Day"/>	<input type="text"/>

Player Preferred First Name <small> ⓘ</small>	Player UserID/Email Address <small> ⓘ</small>	Player Contact Email*
<input type="text"/>	<input type="text"/>	<input type="text" value="SABRRegistrar@gmail.com"/>

Player DOB*	Player Gender
<input type="text" value="August"/> <input type="text" value="28"/> <input type="text" value="2010"/>	<input type="text" value="Male"/>

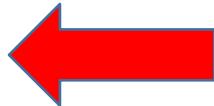
Graduation Year	Player Preferred Language
<input type="text"/>	<input type="text" value="English (US) (English (US))"/>

Time Zone Name

Phone number*	Mobile Phone Number*
<input type="text" value="5613053315"/>	<input type="text" value="5613053315"/>

Phone number*	Mobile Phone Number*
<input type="text" value="5613053315"/>	<input type="text" value="5613053315"/>
Address*	Address (Continued)
<input type="text" value="████████████████"/>	<input type="text"/>
City*	State/Province*
<input type="text" value="Delray Beach"/>	<input type="text"/>
Postal Code*	Country
<input type="text" value="33445"/>	<input type="text" value="United States"/>

Save



Add additional parents if necessary

SABR U5 - U19 Recreational 2021-2022
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Cart (0)

Profile Parents Emergency Info Registration Payment Features

Stormy Day
Change User

Add Parent/Guardian

New User Select

Comiskey, Marlynda
sabregistrar@gmail.com

Parents/Guardians

Continue

Add Emergency/Medical/Physician/Insurance information

MEDICAL INFORMATION REQUIRED AN N/A IF NONE

Emergency Contact One		Emergency Contact Two	
First Name*	Last Name*	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone Number*	Alternate Phone Number	Phone Number	Alternate Phone Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Medical Information	
Allergies*	<input type="text"/>
Enter n/a if not applicable	
Medical Conditions*	<input type="text"/>
Enter n/a if not applicable	

Physician	
Physician First Name	Physician Last Name
<input type="text"/>	<input type="text"/>
Physician Phone Number	Alternate Phone Number
<input type="text"/>	<input type="text"/>

Insurance	
Medical Insurance Provider	Insurance Provider Phone
<input type="text"/>	<input type="text"/>

If Sponsoring complete the information, if not scroll down “Save” and continue

SABR U5 - U19 Recreational 2021-2022
21/22 (2021-08-01 - 2022-07-31)
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Cart (0)

Profile Parents Emergency Info **Registration** Payment Features

 Stormy Day
[Change User](#)

We allow pre-assignment requests only for those who wish to volunteer together: our Coaches in U7 and older, and Team Parents in U5 and U6. Pre-assignments are not guaranteed. Player requests are NOT allowed by anyone, including Coaches, Team Parents, and Sponsors. Children of volunteers are placed on the team with their parent. Only 2 volunteers may serve together on one team. In no case will we allow more than 2 players to be pre-assigned to the same team (or 3 in the case when the coach or assistant coach children are siblings). The only exception is for pre-assignment of siblings of non-volunteers provided SABR is advised during registration and exclusive of children added to the teams from the wait list. We then generate team rosters without any further adjustments. No trades or preferential player assignments will be permitted to avoid problems of team imbalance. THERE WILL BE NO EXCEPTIONS. GAMES AND PRACTICES CAN POSSIBLY BE ANY DAY OF THE WEEK, INCLUDING FRIDAY NIGHTS, SATURDAY AND SUNDAY. Requests for specific practice nights are accommodated only for parents who serve as a volunteer Coach or Team Parent. Team sponsors may request practice nights, which we will try to accommodate after teams are built, but we cannot guarantee.

PLEASE COMPLETE THIS INFORMATION IF YOU ARE SPONSORING A TEAM!!!! Opportunities and donation amounts selected during the check out. Sponsorship opportunities starting at \$395 for team sponsors. Higher levels available at division and club level. Sponsors will be contacted by our Sponsor Coordinator to confirm details.

IF YOU ARE NOT SPONSORING, SCROLL DOWN TO THE BOTTOM AND SIGN THE AGREEMENT BEFORE CONTINUING

COMPANY NAME

Start Typing...

JERSEY COLOR CHOICE 3

Select One...

Team Practice Night Choice 1: Request a practice night preference (subject to availability)

Select One...

Team Practice Night Choice 2

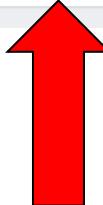
Select One...

Sponsorship does NOT include player registration. SABR will make every effort to accommodate Sponsor requests regarding Team Name, Color, and Practice Night, but makes NO GUARANTEE that such requests will be fulfilled based on availability. Neither Player nor Coach requests will be accommodated. Please refer to the SABR Handbook and/or [SABR F.A.Q.'s online](#) for player pre-assignment rules and regulations.

Questions/Opportunities, email: sponsor@sabrsoccer.net

(Tax Deductible 501c(3) Donation)

Save (Page 1 of 2)



Choose a volunteer opportunity (if applicable)

"How did you hear about SABR?

Then scroll down and Sign the agreement using your mouse on a PC/Laptop or your finger on Phone/iPad

Profile > Parents > Emergency Info > **Registration** > Payment > Features

Stormy Day
[Change User](#)

Volunteer opportunities

Select One...

*** How did you hear about SABR?**

Select One...

FYSA CODE OF ETHICS

Players

- I will encourage good sportsmanship from fellow players, coaches, officials and parents at all times.
- I will remember that soccer is an opportunity to learn and have fun.
- I deserve to play in an environment that is free of drugs, tobacco, and alcohol; and expect everyone to refrain from their use at all soccer games.
- I will do the best I can each day, remembering that all players have talents and weaknesses the same as I do.
- I will treat my coaches, other players and coaches, game officials, other administrators, and fans with respect at all times; regardless of race, sex, creed, or abilities, and I will expect to be treated accordingly.
- I will concentrate on playing soccer. Always giving my best effort.
- I will play by the rules at all times.
- I will at all times control my temper, resisting the temptation of retaliation.
- I will always exercise self control.
- My conduct during competition towards play of the game and all officials shall be in accordance with appropriate behavior and in accordance with FIFA's "Laws of the Game," and in adherence to FYSA rules.
- While traveling, I shall conduct myself so as to bring credit to myself and my team

Parents/Spectators

- I will encourage good sportsmanship by demonstrating positive support for all players, coaches, game officials, and administrators at all times.
- I will place the emotional and physical well being of all players ahead of any personal desire to win.
- I will support the coaches, officials, and administrators working with my child, in order to encourage a positive and enjoyable experience for all.
- I will remember that the game is for the players, not for the adults.
- I will ask my child to treat other players, coaches, game officials, administrators, and fans with respect.
- I will always be positive.
- I will always allow the coach to be the only coach.
- I will not get into arguments with the opposing team's parents, players, or coaches. I will not come onto the field for any reason during the game.
- I will not criticize game officials.
- I shall not possess, consume or distribute before, during or after any game or at any other time at the field and/or game complex alcohol, tobacco, illegal drugs or unauthorized prescription drugs.
- I will refrain from any activity or conduct that may be detrimental or reflect adversely upon FYSA, its members or its programs.

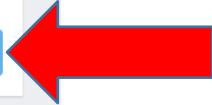
Failure to comply may result in the suspension of your privilege to participate in FYSA sanctioned events, for the following periods: 1st offense -- suspension for a minimum of thirty (30) days to a maximum of five (5) years. 2nd offense -- suspension for a minimum of one (1) year to a maximum of ten (10) years. 3rd offense -- suspension for a minimum of five (5) years to a maximum of fifty (50) years. NOTE: Any individual charged with a violation of this Code of Ethics shall be afforded due process as defined in FYSA's Rule Section 600 before the implementation of any suspension.

Release: I hereby give The Soccer Association of Boca Raton permission to use in their handbook, for advertising or on the website, any soccer pictures in which the players photograph appears.

Please Sign Above

[Clear](#)

[Save \(Page 1 of 1\)](#)



Complete MANDATORY items for FLORIDA YOUTH SOCCER

SABR U5 - U19 Recreational 2021-2022
21/22 (2021-08-01 - 2022-07-31)
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Cart (0)

Profile > Parents > Emergency Info > **Registration** > Payment > Features

Stormy Day U12 (08/28/2010)
[Change User](#)

 **Concussion Waiver 21/22**
Florida Youth Soccer Association [Start](#)

 **Medical Release 21/22**
Florida Youth Soccer Association [Start](#)

 **PLAYER COMMUNICABLE DISEASE/COVID-19 RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT**
Florida Youth Soccer Association [Start](#)

[Continue](#)



Check the box, sign and save the page

SABR U5 - U19 Recreational 2021-2022
21/22 (2021-08-01 - 2022-07-31)
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Marilynda Comiskey

Cart (0)

Profile Parents Emergency Info **Registration** Payment Features

 Concussion Waiver 21/22
Florida Youth Soccer Association

FLORIDA YOUTH SOCCER ASSOCIATION CONCUSSION INFORMED CONSENT

Pursuant to Florida Statute 943.0438, this form must be signed by all youth participants and parent/legal guardians before participating in athletic competition or engaging in any practice, tryout, workout, or other physical activity associated with the youth's candidacy for an athletic team.

Concussion Information

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. Concussions can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. In other words, even a "ding" or a "bump" on the head can be serious. You cannot see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

Signs and Symptoms Observed by Parents or Coaches

***** By signing this agreement, I acknowledge I have read and understand Parent/Legal Guardian of concussion and head injury, including the risk of continuing to play after concussion or head injury, that explains the nature and risk each year before participating.

Please Sign Above

Save (Page 1 of 1) Clear

Medical Release Form - sign and save the page



Medical Release 21/22

Florida Youth Soccer Association

PARENT/GUARDIAN CONSENT AND MEDICAL RELEASE

Recognizing the possibility of injury or illness, and in consideration for US Youth Soccer and members of US Youth Soccer accepting my son/daughter as a player in the soccer programs and activities of US Youth Soccer and its members (the "Programs"), I consent to my son/daughter participating in the Programs. Further, I hereby release, discharge, and otherwise indemnify US Youth Soccer, its member organizations and sponsors, their employees, associated personnel, and volunteers, including the owner of fields and facilities utilized for the Programs, against any claim by or on behalf of my player son/daughter as a result of my son's/daughter's participation in the Programs and/or being transported to or from the Programs. I hereby authorize the transportation of my son/daughter to or from the Programs.

My player son/daughter has received a physical examination by a licensed medical doctor and has been found physically capable of participating in the sport of soccer. I have provided written notice, which is submitted in conjunction with this release and attached hereto, setting forth any specific issue, condition, or ailment, in addition to what is specified above, that my child has or that may impact my child's participation in the Programs. I give my consent to have an athletic trainer and/or licensed medical doctor or dentist provide my son/daughter with medical assistance and/or treatment and agree to be financially responsible for the reasonable cost of any such assistance and/or treatment.

Please Sign Above

[Clear](#)

[Save \(Page 1 of 1\)](#)

Player Communicable/Disease/Covid-19 Release of Liability - sign and save the page



PLAYER COMMUNICABLE DISEASE/COVID-19 RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

Florida Youth Soccer Association

FYSA COMMUNICABLE DISEASE
RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

In consideration of being allowed to participate in any way in any Florida Youth Soccer Association, Inc. ("FYSA") related events and activities I, the undersigned participant, parent, or legal guardian, acknowledge, appreciate, and agree that:

By participating in FYSA related events and activities, there are certain risks to me arising from or related to possible exposure to communicable diseases including, but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for the Coronavirus Disease (also known as COVID-19) and/or any mutation or variation thereof (collectively referred to as "Communicable Diseases"). I am fully aware of the hazards associated with such Communicable Diseases and knowingly and voluntarily assume full responsibility for any and all risk of personal injury or other loss that I may sustain in connection with such Communicable Diseases.

I, for myself or for my minor child(ren) or ward(s), and on behalf of my/our heirs, assigns, beneficiaries, executors, administrators, personal representatives, and next of kin, **HEREBY EXPRESSLY RELEASE, HOLD HARMLESS, AND FOREVER DISCHARGE FLORIDA YOUTH SOCCER ASSOCIATION, INC.** and its officers, officials, agents, representatives, employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises upon which FYSA related events and activities take place (the "Released Parties"), from any and all claims, demands, suits, causes of action, losses, and liability of any kind whatsoever, whether in law or equity, arising out of or related to any **ILLNESS, INJURY, DISABILITY, DEATH, OR OTHER DAMAGES** incurred due to or in connection with any Communicable Diseases, **WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASED PARTIES OR OTHERWISE**, to the fullest extent permitted by law.

I agree that this Agreement is intended to be as broad and inclusive as is permitted by the laws of the State of Florida, and if any portion hereof is held invalid, it is agreed that the remainder shall continue in full legal force and effect.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Please Sign Above

Clear

Save (Page 1 of 1)

Once COMPLETE Continue

SABR U5 - U19 Recreational 2021-2022
21/22 (2021-08-01 - 2022-07-31)
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👤 Marlynda Comiskey

Cart (0)

Profile Parents Emergency Info **Registration** Payment Features

 Stormy Day
[Change User](#) U12 (08/28/2010)

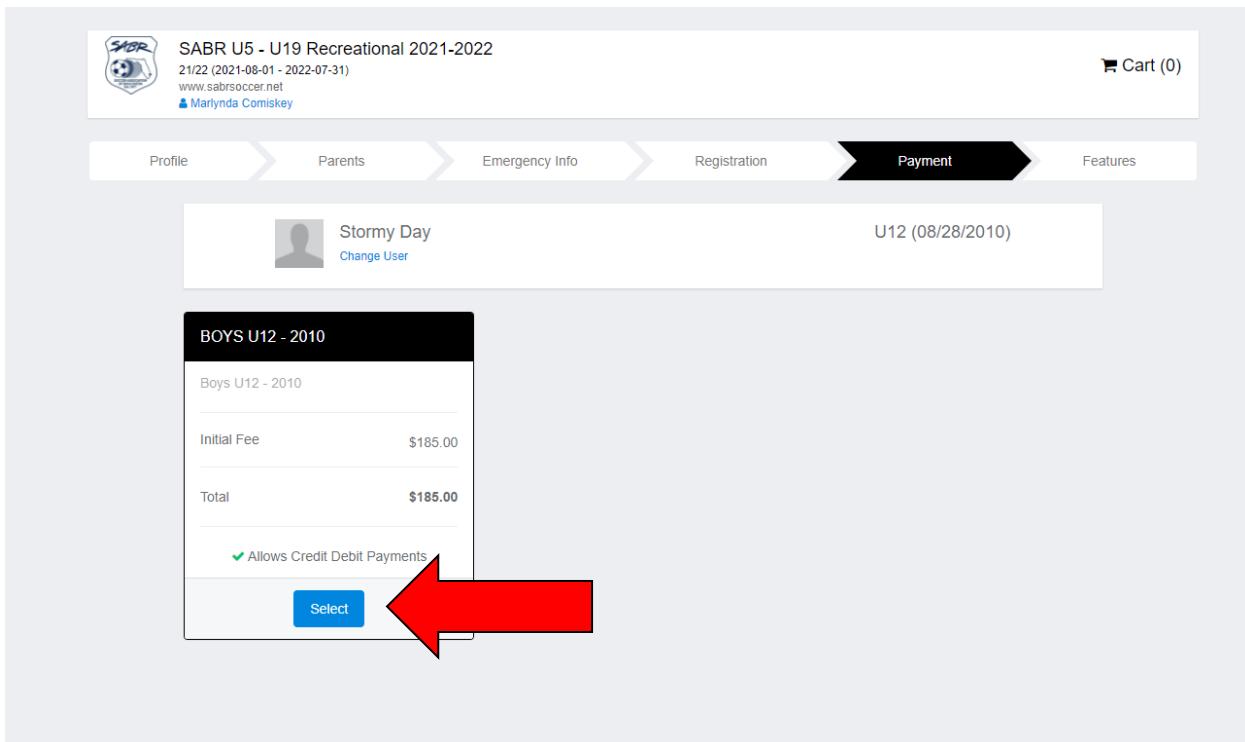
 Concussion Waiver 21/22
Florida Youth Soccer Association  Complete

 Medical Release 21/22
Florida Youth Soccer Association  Complete

 PLAYER COMMUNICABLE DISEASE/COVID-19 RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT
Florida Youth Soccer Association  Complete

 [Continue](#)

Select Payment



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Cart (0)

Profile Parents Emergency Info Registration **Payment** Features

Stormy Day
Change User

U12 (08/28/2010)

BOYS U12 - 2010

Boys U12 - 2010

Initial Fee \$185.00

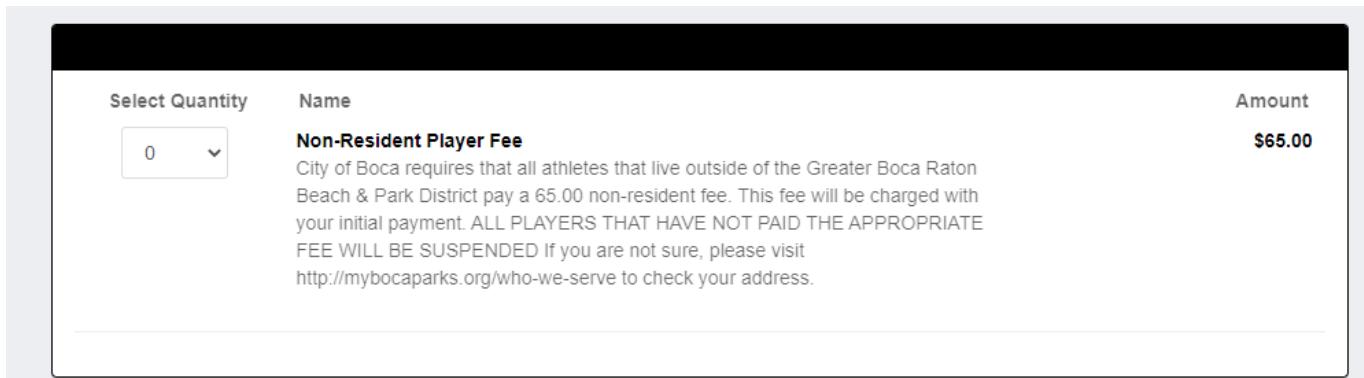
Total \$185.00

Allows Credit Debit Payments

Select

Choose Quantity 1. If you live outside the Greater Boca Raton Beach and Park District, you must pay the Non-Resident Fee. See District map to check: <http://mybocaparks.org/who-we-serve>

There is not a hyper link to the map in the registration software – you must copy and paste the link into a new browser window to see if you live outside the District.



Select Quantity	Name	Amount
0	Non-Resident Player Fee City of Boca requires that all athletes that live outside of the Greater Boca Raton Beach & Park District pay a 65.00 non-resident fee. This fee will be charged with your initial payment. ALL PLAYERS THAT HAVE NOT PAID THE APPROPRIATE FEE WILL BE SUSPENDED If you are not sure, please visit http://mybocaparks.org/who-we-serve to check your address.	\$65.00

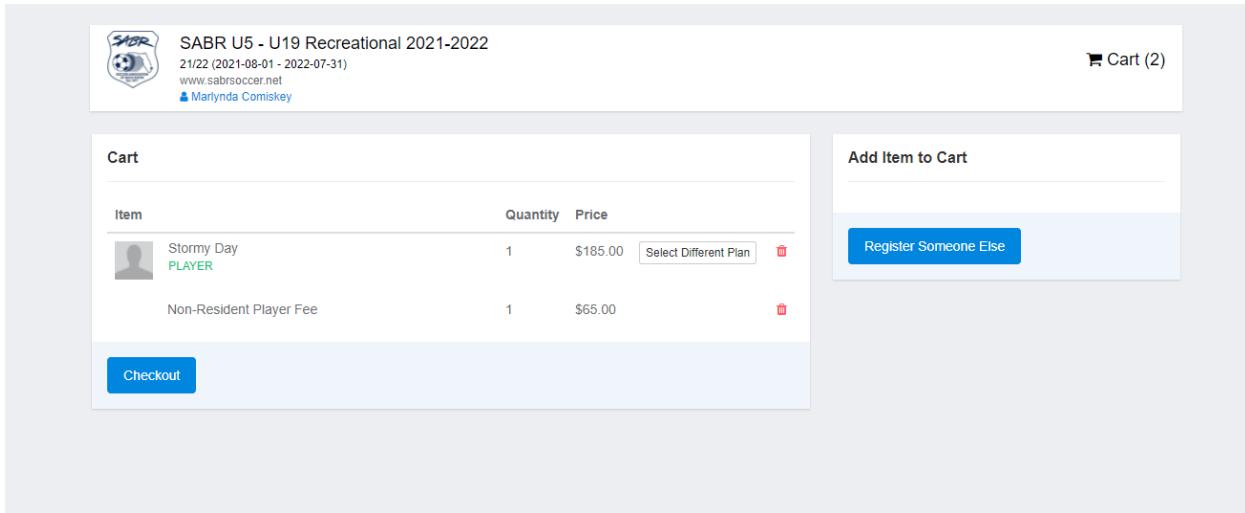
If sponsoring, choose Quantity 1 for the applicable Sponsorship

Sponsor Opportunities		
Select Quantity	Name	Amount
<input style="width: 50px; height: 25px; border: 1px solid #ccc; border-radius: 5px; padding: 2px 5px;" type="button" value="0"/>	01-Team Sponsor U5-U19 CORPORATE LOGO or Team Name on Team Jersey front	\$395.00
<input style="width: 50px; height: 25px; border: 1px solid #ccc; border-radius: 5px; padding: 2px 5px;" type="button" value="0"/>	02-Team Sponsor U5-U19 CORPORATE LOGO or Team Name on Team Jersey front and Logo or Team Name on Shorts	\$445.00
<input style="width: 50px; height: 25px; border: 1px solid #ccc; border-radius: 5px; padding: 2px 5px;" type="button" value="0"/>	03-Team Sponsor U5-U19 CORPORATE LOGO or Team Name on Team Jersey front and Logo or Team Name on Jersey Back above Number	\$445.00
<input style="width: 50px; height: 25px; border: 1px solid #ccc; border-radius: 5px; padding: 2px 5px;" type="button" value="0"/>	04-Team Sponsor U5-U19 CORPORATE LOGO or Team Name on Team Jersey front, Shorts, and Jersey Back above Number	\$495.00
<input style="width: 50px; height: 25px; border: 1px solid #ccc; border-radius: 5px; padding: 2px 5px;" type="button" value="0"/>	05-Team Sponsor TOPSoccer Corporate Logo or Team Name on Team Jersey	\$500.00
<input style="width: 50px; height: 25px; border: 1px solid #ccc; border-radius: 5px; padding: 2px 5px;" type="button" value="0"/>	99-Premium Level Sponsorship - Multiple Teams Premium Level Sponsorship - I am interested in Keeper, Division, Silver, Gold, or Platinum Level Sponsorship. Please contact me to finalize my Sponsorship. Refer to SABR Sponsorship Application on SABRSoccer.net for detailed descriptions of Sponsor Levels.	\$0.00

Continue



Choose “Checkout” or Register another player



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Mariynda Comiskey

Cart (2)

Cart

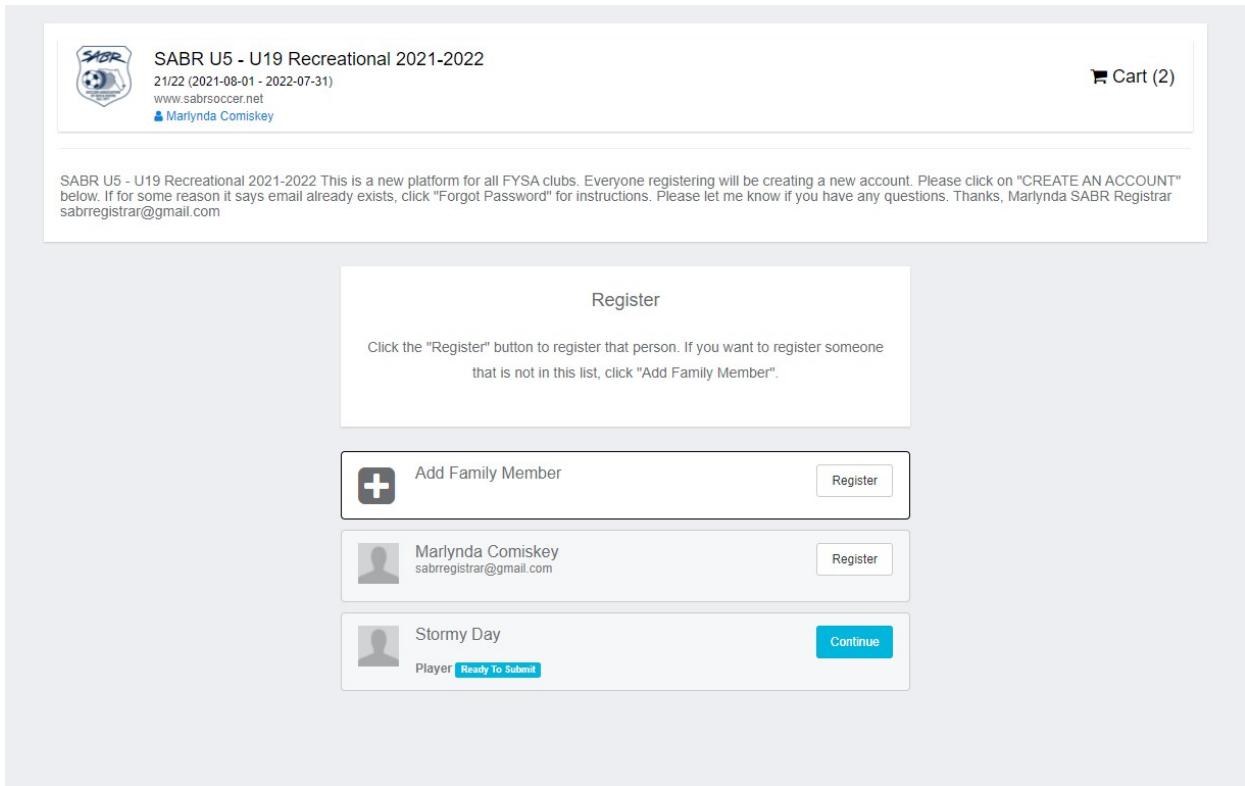
Item	Quantity	Price	Actions
Stormy Day PLAYER	1	\$185.00	Select Different Plan
Non-Resident Player Fee	1	\$65.00	

Add Item to Cart

Register Someone Else

Checkout

If adding another player, click Register to Add Family Member and repeat the process



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21/22 (2021-08-01 - 2022-07-31)
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Mariynda Comiskey

Cart (2)

SABR U5 - U19 Recreational 2021-2022 This is a new platform for all FYSA clubs. Everyone registering will be creating a new account. Please click on "CREATE AN ACCOUNT" below. If for some reason it says email already exists, click "Forgot Password" for instructions. Please let me know if you have any questions. Thanks, Mariynda SABR Registrar
sabregistrar@gmail.com

Register

Click the "Register" button to register that person. If you want to register someone that is not in this list, click "Add Family Member".

Add Family Member

+ **Register**

 **Mariynda Comiskey**
sabregistrar@gmail.com

 **Stormy Day**
Player Ready To Submit

If Checking out – Enter CC information, **Check Yes, I agree and the Pay**

<p>Fill out form to complete registration</p> <p>Charged Today \$250.00 Charged Later \$0.00 Total \$250.00</p> <p>Credit Card Information</p> <p>Credit Card Number Card Number</p> <p>Expiration Date MM/YYYY Cvc Code CVV</p> <p>Payment Terms</p> <p>Payment must be made in full for the player to be registered.</p> <p>SABR will honor all registration cancellation refund requests up to September 30, 2021, less a \$25.00 administrative fee. All requests must be in writing.</p> <p>Your registration fee includes uniforms, insurance, equipment, coaches training and affiliation with FYSA . These expenses are paid in advance of our 2021–2022 season and cannot be recouped.</p> <p>Email requests to Registrar@sabrsoccer.net</p> <p><input type="checkbox"/> Yes, I agree</p> <p>Pay</p>	<p>DUE TODAY</p> <table><tr><td>Non-Resident Player Fee (1)</td><td>\$65.00</td></tr><tr><td>Program Registration - Stormy Day - Player</td><td>\$185.00</td></tr><tr><td>Total</td><td>\$250.00</td></tr></table> <p>DUE LATER</p> <table><tr><td>Total</td><td>\$0.00</td></tr></table> <p>WAITLIST</p> <table><tr><td>Total</td><td>\$0.00</td></tr></table>	Non-Resident Player Fee (1)	\$65.00	Program Registration - Stormy Day - Player	\$185.00	Total	\$250.00	Total	\$0.00	Total	\$0.00
Non-Resident Player Fee (1)	\$65.00										
Program Registration - Stormy Day - Player	\$185.00										
Total	\$250.00										
Total	\$0.00										
Total	\$0.00										

