

2010 Town of Windsor Youth Recreational Soccer Registration

Child's Name: _____ **Date of Birth:** _____

Address: _____ **Phone #:** _____

City/State/Zip: _____ **Sex:** M _____ F _____

Mother's Name: _____ **Cell Ph. #:** _____

Father's Name: _____ **Cell Ph. #:** _____

Emergency Contact: _____ **Phone #:** _____

EMAIL Address for Mailing List: _____

Grade as of September 2010:

Only Grade levels K – 6 are eligible to play in this league.

_____ Kindergarten _____ First _____ Second

_____ Third _____ Fourth _____ Fifth _____ Sixth

School attending in Fall 2010: _____

Did you play in the Windsor Soccer Program last year? YES NO

I understand that there will be travel to Lanesboro, PA for Grades 3 – 6.

(Initial if applicable)

COACHES AND VOLUNTEERS NEEDED:

_____ Yes, I would like to be a coach.

_____ Yes, I would like to be an assistant coach.

_____ Yes, I would like to volunteer in the Concession stand.

_____ Yes, I would like to help with the Booster Club and the Fundraisers.

_____ Yes, I would like to help set up fields and paint lines.

Shirt Size:

Youth S _____ M _____ L _____

Adult S _____ M _____ L _____

Players are responsible for their own shorts, shin guards and cleats. Shirts & Socks will be provided. Players are responsible for providing their own soccer balls and bringing them to each practice.

I, the parent of the above named child, give my approval for his/her participation in any and all activities sponsored by the Town of Windsor. I assume all risks and hazards incidental to such participation and agree to hold harmless; Town of Windsor Youth Programs, the organizers, supervisors, and participants for any claim arising out of injury to my child.

I certify that my child has not had any illness, accident, broken bones, or injuries during the past six months that would hinder him/her from participating in said activities.

Signature of Parent

Date

Special Requests: (Only honored after best efforts are made to make sure teams are even)

Payment: \$30 for first child and \$10 for each additional child in family

SPONSORSHIPS:

 Yes, I have found the following Sponsor: _____

Team Sponsor Amount (\$200): _____

Club Sponsor (\$500): _____

PAID: CHECK _____

CASH _____

MAIL REGISTRATION FORMS AND PAYMENTS TO:

**Windsor Youth Soccer Program
P.O. Box 262
Windsor, NY 13865**