

Lohff-Schumann TK-8th Grade Soccer Registration Form

Registration forms due back by February 20th

Competitor/Child's Full Name: _____

Child's Date of Birth: ____/____/____ Current Grade: _____

Father's Name: _____ Home Ph: _____ Cell Ph: _____

Mother's Name: _____ Home Ph: _____ Cell Ph: _____

Home Address: _____ City: _____ St: _____ Zip: _____

Email Address: _____

Emergency Contacts: (If parents cannot be contacted)

1st) _____ Phone: _____

2nd) _____ Phone: _____

Please circle any activities parents would like to participate in:

Coach: (yes or no) _____

Person Volunteering: _____

Other Ideas: _____

Registration Fee: LS Members \$30 – Non-LS Members \$35

If you do not have a shirt from last year, shirts are an additional \$8

Divisions include: TK-1st Boys, TK-1st Girls, 2nd-3rd Coed, 4th-6th Coed, 7th-8th Coed

Season games are played Saturday mornings mid-April thru late May.

WAIVER: I give permission for my child, listed on this registration form, to participate in the Youth Soccer Program. I understand that it is the parent's responsibility to provide any needed insurance and hereby release the Youth League, Community School, Association, Board Members, Coaches and Umpires from any liability associated with any injury my child may receive while participating in scheduled practices, games or tournaments.

STATEMENT OF UNDERSTANDING: I understand that it is the parent's responsibility to provide transportation to/from practices and games. I further understand that registration fees are due at time of registration and parents are required to assist with field cleanliness.

Parent's Printed Name: _____

Parent's Signature: _____ Date: _____