

Seymour Recreation Soccer 2012 Spring Player Registration

Registration Fees - \$50
Registration closes on March 9th

Register Online at: www.seymoursoccer.com
Or

Mail completed form and payment to:
Seymour Soccer Association
PO Box 1152, Seymour, IN 47274



Players must be 4 years old by July 31, 2011.

_____ NEW PLAYER – Please check here if player has NOT played with Seymour Soccer before.

Last Name: _____ First Name: _____ Male [] Female []

Telephone: _____ Cell Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Yrs of Soccer Experience: _____ Birthdate: _____

Father's Name: _____

Mother's Name: _____

Shirt Size (Circle One): Youth -- XS(4/5) S(6/8) M(10/12) L(14/16) Adult -- S M L XL XXL

Please circle any areas of interest in which you would like to volunteer:

Head Coach / Asst. Coach / Team Parent / Rec Committee / Board Member

Additional information and/or Comments

As the parent or Legal Guardian of the above named player, I hereby give consent for emergency medical care provided by a duly licensed Doctor of Medicine, Doctor of Dentistry, Nurse Practitioner, registered Nurse or other Emergency Personnel. This care may be given under whatever conditions are necessary in order to preserve the life, limb or well-being of the above named player.

Yes [] No [] I release the Seymour Soccer Association to use my/my child's photograph(s) in future publications, including the Seymour Soccer website.

Signature of Parent/Guardian

Printed Name

Date

Seymour Soccer Association Use Only

Date received

Fee paid\$

Cash [] Check #

Birthdate verified by: