

St. Joan of Arc Fall 2011 Soccer Registration Form

REGISTRATION INSTRUCTIONS

1. Complete the form below.
2. Place the form in an envelope labeled "Soccer Registration".
3. Deliver the envelope to the SJA school office before 08/19/11. Soccer participation cannot be guaranteed after the deadline as we have to register our teams with CYO at this time.
4. Please note: You will be invoiced by the Church's finance office for the \$40 registration fee.
5. Download from the Church or CYO websites and complete the CYO Player/Parent Contract and the CYO Emergency Medical Authorization forms. Please have these forms available for your coach prior to your child's participation.

Player Name: _____

Parent Name(s): _____

Address: _____

Phone: _____ Birth Date: ___ / ___ / ___ Email: _____

School attended/Grade during season: _____

Are you playing another sport during spring soccer: Yes _____ No _____

If YES, please indicate which sports/leagues you will be participating in:

Are there concerns or special situations that we should know about? _____

Parent is willing to be a head coach: yes _____ no _____

Parent is willing to be an assistant coach: yes _____ no _____

We, athlete and parent, understand that participation in athletics involves the possibility of serious injury. In consideration of the benefits from and because participation in the St. Joan of Arc sports program is voluntary, the undersigned parent/guardian hereby waive, release, and discharge the players, coaches, assistants, St. Joan of Arc Athletic Board, St. Joan of Arc School/Parish, and it's representatives, for all claims for or on account of any personal injury or damage to the said player of any kind arising in connection with said activity.

Parent Signature: _____ Date: _____

Commissioner use only: _____ Date Received: _____

For questions, please contact Steve Irwin, Soccer Commissioner, via email at sgirwin@att.net or by phone (419) 867-8755.