LUMBERTON RECREATION
OUTDOOR SOCCER 2010

Parents: Please Circle a shirt size for your child:

YS YM YL

AS AM AL

AXL

Practice starts in August
Games start in September

Fee: $60 resident / $ 70 non resident
Age: Players *going into* K through 8th grades for the 2010-2011 school year.
Registration Deadline: June 25, 2010.

PLEASE PRINT!!! COMPLETE ADDRESS!!!!

Please check here if you *do not* wish to be included in our electronic Recreation Newsletter_____

Players Name (print):_____Birth date_____
Mailing Address: _____
E-Mail Address:_____Current Grade:_____
Do you play travel soccer _____ **Gender (please circle): Male Female**
GRADE PLAYER IS ENTERING FALL 2010 _____
Parent/Guardian Names: _____
Home Telephone: _____Work #:_____
Cell Phone #1: _____Cell Phone #2: _____
Players Physician _____Telephone #_____
Emergency contact _____Telephone # _____
Any physical restrictions or allergies? Please list: _____

I *DO* *DO NOT* (please circle) give permission to have my child appear in any media coverage of the Lumberton Recreation Soccer Program.

Please READ/SIGN _____ has my permission to participate in all activities of the above registered program. In case of emergency, I authorize the programs assigned personnel to administer emergency first aid treatment, transport my child to the nearest hospital if necessary, and notify me as quickly as possible. I understand that proper supervision is provided for all programs. However, in the event of an emergency due to accidents beyond their control, I hereby release Lumberton Department of Recreation, its supervisors, employees, sponsors and program volunteers, from all liability.

_____ _____
Parent/Guardian Signature **Date**

I would like to volunteer for the following:
_____Coach Shirt Size _____ Assist. Coach _____ Shirt Size____

Have you taken the Rutgers course? Yes___ No___
Have you been fingerprinted? Yes___ No___
There will only be ONE head coach and ONE assistant coach per team.
Due to the number of players we can not accept teammate or coach requests.

*Please reference the website – http://recreation.lumbertontwp.com for ***return check*** and ***refund policies***.
There is a $20 return check fee.

DATE PAID_____
REC'D BY_____
CHECK#_____
AMOUNT$_____
SIBLING?_____