

**St. Sebastian 1st & 2nd Grade Soccer Registration
FALL SEASON 2011**

Ages:

First and second grade children only.

Requirements:

Fee is \$25.00 per child or \$40.00 per family. Shirts and socks will be provided and are the child's to keep at the end of the season. Any extra funds will be used for new equipment and goal replacement.

Required Gear:

Shin guards are a must for all games and practices. Optional gear: Soccer shoes and soccer ball (size #3)

Where:

Treaty Line Field or another location TBD, Saturday mornings between 8:30 a.m. and 2:00 p.m.

All games are about 1 hour, rain or shine

If you have any questions, please call Jennifer Puglia 330-835-1338

*All fees and registration forms **must** be turned in by Saturday, August 27th, 2011*

Please fill out and return this form completely.

*Make checks payable to **St. Sebastian Booster Club***

**Please drop off to school office marked soccer registration ATTN. Jennifer Puglia/
St. Sebastian Soccer Club or mail to Jennifer at 138 S. Pershing Ave. Akron, OH
44313**

Please print clearly. Without this form properly filled out your child will not be eligible to play.

Fee paid Yes / No Cash _____ Check # _____
NAME _____ Birthdate _____ Age _____ Grade _____
Address _____
Phone number _____ Cell number _____
BOY GIRL E-mail address _____
Parent/Guardian's names (print clearly) _____

Yes, I will volunteer (please circle one) Head coaching Asst. coaching Referee

Name _____ Phone # _____

We need volunteers to make this program a successful experience for each child. Please take an active interest. Thank you for your support.

CONSENT FOR MEDICAL TREATMENT (MINOR CARE)

As a parent or legal guardian of the above named player, I hereby give consent for emergency care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of my dependent. Signature of parent or guardian _____

Address: _____