

2016 TRI-CITY SOCCER REGISTRATION

BOYS AND GIRLS AGES 5 THRU 13 AS OF 9/1/16
 REGISTRATION FEE: \$35.00 FRIDAY, July 29th



(\$5 late fee will be applied after deadline)

REGISTRATION LOCATION: MAIL-IN, WALK-IN or ON-LINE @signupville.com/eastalton

EAST ALTON RECREATION DEPT.
 KEASLER COMPLEX
 615 3rd STREET
 EAST ALTON, IL 62024

ROXANA RECREATION DEPT.
 ROX-ARENA, ROXANA PARK
 #2 PARK DRIVE
 ROXANA, IL 62084

WOOD RIVER RECREATION
 WOOD RIVER ROUNDHOUSE
 633 WOOD RIVER AVE.
 WOOD RIVER, IL 62095

BOYS DIVISIONS	AGES		GIRLS DIVISIONS	AGES
PEE-WEE	5-7		PETITE	5-7
BANTAM	8-10		CHIC	8-10
MIDGET	11-13		SOPHOMORE	11-13

☺ Child will be placed in appropriate age bracket by agency ☺

The Tri-City Agencies are responsible for determining which roster a child is placed on, not coaches or parents!

T-SHIRT SIZE: YS(6-8)___ YM(10-12)___ YL(14-16)___ AS___ AM___ AL___ AXL___

Did you play last year? Y___ N___ If yes, what team?_____

NAME_____ MALE___ FEMALE___ BIRTHDATE ___/___/___ AGE___

ADDRESS_____ CITY_____ PHONE_____

EMAIL ADDRESS_____

SCHOOL ATTENDING_____ GRADE_____

ANY MEDICAL CONDITIONS?_____

EMERGENCY CONTACT_____ PHONE_____ RELATION_____

I, the undersigned parent or legal guardian of the above named minor, do agree to abide by the Parents Code of ethics and hereby consent and agree that the above named minor may participate in the Tri-City Recreation program. I understand and acknowledge that there are certain risks of physical injury associated with my child's participation in the above named program which may occur through no fault of any volunteers, participants, employees or officers of the Tri-City Recreation League, and/or other sponsors.

Date

Signature of Parent or Legal Guardian

Work Phone

!NO REFUNDS!

All coaches are volunteers, parents for the most part, who give their time and efforts to make youth programs possible. Please indicate below if you are willing to be a coach or assistant coach.

Mandatory for all coaches & assistants to fill out coaches application & background authorization. This is for the safety of our children.

NAME_____ PHONE_____ COACH ASSIST

OFFICE USE ONLY

DATE PAID_____ AMOUNT PAID \$_____ RECEIVED BY_____

CANDY SALES:

NAME_____ DL#_____

DATE_____ RECEIVED BY_____

Registration deadline: Friday July 29, 2016 by 5:00PM (\$40 after deadline)