

# Claire Chapin Epps YMCA Youth Sports Registration

## Spring Soccer 2012

**PLEASE PRINT CLEARLY**

Child's Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Birth Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Age \_\_\_\_\_ Home Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Father/Guardian \_\_\_\_\_ Mobile/Work \_\_\_\_\_ / \_\_\_\_\_  
 Mother/Guardian \_\_\_\_\_ Mobile/Work \_\_\_\_\_ / \_\_\_\_\_  
 Any Health Concerns: \_\_\_\_\_

<p><b><u>Please check age group:</u></b></p> <p><input type="checkbox"/> U6 Girl <input type="checkbox"/> Boy</p> <p><input type="checkbox"/> U8 Girl <input type="checkbox"/> Boy</p> <p><input type="checkbox"/> U10 Boys</p> <p><input type="checkbox"/> U10 Girls</p> <p><input type="checkbox"/> U12 Boys</p> <p><input type="checkbox"/> U12 Girls</p> <p><input type="checkbox"/> U14 Boys</p> <p><input type="checkbox"/> U14 Girls</p>	<p><b><u>Jersey size (Check one):</u></b></p> <p><input type="checkbox"/> Youth Small <input type="checkbox"/> Youth Med.</p> <p><input type="checkbox"/> Youth Large <input type="checkbox"/> Adult Small</p> <p><input type="checkbox"/> Adult Med. <input type="checkbox"/> Adult Large</p> <p><input type="checkbox"/> Adult XL</p>	<p><b><u>Playing Experience (check one)</u></b></p> <p>Beginner _____</p> <p>1-2 years or C Player _____</p> <p>3-4 years or B Player _____</p> <p>4+ years or A Player _____</p>
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**Special Requests:**  
 We will attempt to accommodate your specific requests. However, we can not guarantee that we will be able to do so.

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**Cost:      \$50 for Members**  
**\$60 for Non-Members**

**RELEASE OF LIABILITY**

**In the event an accident occurs, I am aware that the YMCA does not provide accident insurance, and I will not hold the YMCA responsible for any injury.**

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**PARENT CODE OF CONDUCT**

**I, as parent/guardian, promise to be respectful of the other parents, coaches, officials, and children on both teams. I promise to show sportsmanship and keep in mind that we, as adults, will be setting examples for the children. Failure to sign this pledge may result in termination of my child's sports participation, as will any unacceptable behavior on my part.**

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**YOUTH SPORTS SPONSORSHIP-SIGN UP TODAY!!!!!!**

Youth Sports Sponsorships are a great way to advertise your business and help in your community. We have several different levels of sponsorships available. Please email [williamc@coastalcarolinaymca.org](mailto:williamc@coastalcarolinaymca.org) for more information.

**VOLUNTEER OPPORTUNITIES!!!**

**I would like to serve as COACH \_\_\_\_\_ ASST COACH \_\_\_\_\_ TEAM PARENT \_\_\_\_\_**

**I would consider coaching if my child's team does not have a coach. Please contact me. \_\_\_\_\_**

