

2017 BRIELLE RECREATION
PRE-K THRU 2ND GRADE SOCCER

Please clearly print a separate form for each child registered.

Cost \$15 for one or \$25 per family.

Name _____ Male Female

Current Grade: Pre - K K 1 2
(Pre-K must be age 5 by Sept. 30th)

Shirt Size: YS YM YL AS

Birthdate: (Month/day/year) _____

Parent / Guardian's Name: _____

Street: _____

Phone: Home _____ Cell: _____

Email Address: _____

Please indicate which parent is willing to volunteer to coach and with whom (if applies)

COACH

ALTERNATE / ASSISTANT

Release: I understand that soccer is a potentially dangerous activity. By signing below, I agree to assume all risks associated with participation in this program, including but not limited to: falling, injury, player contact and the effect of weather on the field conditions. Having read this waiver, and in the acceptance of registration, acting as parent / guardian, my executors, and administrators do hereby waive and release any and all rights and claims for damages I may have against Brielle Recreation, the municipality or individuals associated with this event and their representatives, successors, and assigns for any and all injuries suffered by me and/or my child in said event. I attest to the fact that my child is medically fit to play soccer.

Parent / Guardian Signature

Date

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For Recreation Use Only: Cash Check # _____