

2011 CALEDONIA SOCCER REGISTRATION FORM

P.O. BOX 422, Caledonia, MS 39740

Make checks payable to CPR Sports.

Registration Fee is \$50.00. Add \$25.00 late fee after August 13th. Late Registration will not be accepted until late fee is received. All registrations received after August 21st will be placed on a waiting list and players will be added only if roster space is available in accordance with our handbook.

Players Name: _____ Birth Date: _____ BC # _____

(Birth Certificate # is mandatory)

Gender: Male _____ Female _____ Age as of 07/31/2011: _____ Age Division: _____

Was this child registered with Caledonia Soccer last season. Yes _____ No _____

Jersey Size _____ Shorts Size _____ (Available sizes are YXS, YS, YM, YL, AS, AM, AL, AXL)
YXS - AXL YS - AXL

Has your child participated in soccer before? _____ If so, how many years have they played? _____

(U-10 & up only) Has your child played goalkeeper previously? Yes No

Home Address: _____

City: _____ State: _____ Zip: _____

Home Telephone Number: _____ Email: _____

Father's Name: _____ Cell/Work Number: _____ / _____

Mother's Name: _____ Cell/Work Number: _____ / _____

Alternate Contact Name & Number: _____

Active participation of parents in the program is needed. Please list name and phone number of person willing to volunteer in one of the following positions: (If you are volunteering as coach or sponsor, you will have your child on your team)

_____ Coach _____ Asst. Coach _____ Board Name _____

Phone _____ If Coach or Asst. Coach, Jersey Size _____

If you know a business or person willing to sponsor a team, please provide the following information:

Business & Contact Name _____ Phone _____

I/We the parents of the above child, hereby give approval for his/her participation in any and all activities connected with the above program. I/We assume all risks and hazards incidental to the conduct of the activity, and transportation to and from the activities and I/We do further hereby release and hold harmless the Caledonia Park Board, Town of Caledonia, the sponsors, the supervisors (both staff & volunteers) and/or all of them from any and all claims of injury and/or claims arising from participation in the above activity. In case of injury to my child, I/We likewise waive all claims for damages that we might have against the above mentioned and likewise waive any claim against my person transporting my/our child to or from activities. I agree to abide by the policies and guidelines of the Caledonia Park Board and the objectives and goals of the youth soccer program. I have read the above and understood all of the above.

Parent/Guardian Signature: _____

WEBSITE PERMISSION FORM : <http://www.caledoniapark.net>

By checking one of the lines below I give/deny CPR and/or the webmaster the right to publish my child's sports information and photographs on the Caledonia Park and Recreation web page. By agreeing, I release CPR and the webmaster from any and all liability.

_____ YES I agree to the terms above Parent Name _____

_____ NO I do not agree to the terms above

Parent Signature: _____ **Date:** _____

CPR Soccer Board Use Only:

Form of Payment: _____ Cash _____ Check (Check #) _____ Board Member Initials: _____