

Tri-Boro 2009 Fall Registration

Date of Birth: _____ Team Age Division U-____ (Circle one) Boy or Girl

Are you interested in playing travel soccer (U9 & above)? (Circle one) Y or N

Coach or other request: _____
 (We will attempt to accommodate reasonable requests, but no guarantees)

1. Fill out and sign this registration form. **Print Clearly.**
2. Fill out and sign the RG6 form.
3. U6 program is offered in the Fall. U7 and above are both Fall and Spring.

Player's Information:

First Name: _____ Last Name: _____

Telephone number: _____ Email: _____

School District: _____

Medical Conditions/Allergies, please specify _____

Emergency Contact Name and Phone # _____

FEES	Registration	&	Fundraiser		OR	Buyout	Refund*	
			Candy	or			Cards	Before Aug 1 st
Age Level	+\$10.00 if after Jul 15 th							
U6	\$50.00		\$52.00		\$40.00	\$30.00	\$50.00	\$25.00
U7 & Up	\$65.00		\$52.00		\$40.00	\$30.00	\$65.00	\$35.00

Uniform not included.

***Once the season starts, NO refund will be issued.**

Optional Contribution: Pat Sinatore Memorial Scholarship Fund \$1.00 _____ \$5.00 _____ Other _____

Your signature below indicates you have filled out everything correctly and understand the refund policy.
 Registration will not be processed if blank.

Signature: _____ Date _____

Make all checks or money orders payable to Tri-Boro Soccer.

Total: _____ Check or Money Order Number: _____

COACHING OPPORTUNITIES AVAILABLE

Don't let your player be left out. If you enjoy working with kids, then sign up to help coach.
 No experience necessary and free training is available. **Head Coaches qualify for the volunteer discount.**

(Check one) Head Coach _____ Assistant Coach _____

First Name: _____ Last Name: _____

Telephone number: _____ Email: _____

-----All Coaches need to fill out an RG6 form.-----