

# HFG Soccer

## 2010 Fall Recreation Soccer & Lazars Soccer Club Registration Form



**Registration @ Hickory/Forest Hill Recreation Center**

Saturday, May 1<sup>st</sup>, 2010                    9:00 AM – 12 Noon  
 Wednesday, May 5<sup>th</sup>, 2010            6:30 PM – 9:00 PM  
 Saturday, May 8<sup>th</sup>, 2010                9:00 AM – 12 Noon  
 Tuesday, May 11<sup>th</sup>, 2010               6:30 PM – 9:00 PM

**Fees:**

\$50/child (4, 5 & 6 year old Clinic and U08 programs)  
 \$70/child (U09 through U15 programs)  
 Lazars Soccer Club players will be subject to additional fees  
**Add \$20 late fee after May 31<sup>st</sup>**

**Late Registration:** After May 31<sup>st</sup>, **space permitting**, registration fees will increase by \$20. Please visit our web site at [www.hfgsoccer.com](http://www.hfgsoccer.com) for late registration instructions and answers to most of your other questions.

**\*Please complete a separate registration form for each child being registered**

Name:	Please Circle: <b>Male or Female</b>	Date of Birth (DOB):
Father's Name:	Mother's Name:	Age on 7/31/2010:
Father's Mobile Phone:	Mother's Mobile Phone:	Home Phone:
Email 1:	Email 2:	<u>In case of emergency – Name/Phone</u>

Any physical conditions or allergies the instructor/coach should be aware of? \_\_\_\_\_

The Hickory/Fountain Green Soccer Program is a growing volunteer organization. Please volunteer where you are able. Thank you!

Coach             Asst. Coach             Field Set-Up             Equipment

**Please Indicate Age Group Preference (Check)**

- 4 Year Old (U05) Clinic - Co-Ed (DOB: 8/1/05 – 7/31/06)
- 5 Year Old (U06) Clinic - Co-Ed (DOB: 8/1/04 – 7/31/05)

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|---|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> U07 Boys' Clinic (DOB: 8/1/03 – 7/31/04)</li> <li><input type="checkbox"/> U08 Boys (DOB: 8/1/02 – 7/31/03)</li> <li><input type="checkbox"/> U09 Boys (DOB: 8/1/01 – 7/31/02)</li> <li><input type="checkbox"/> U10 Boys (DOB: 8/1/00 – 7/31/01)</li> <li><input type="checkbox"/> U11 Boys (DOB: 8/1/99 – 7/31/00)</li> <li><input type="checkbox"/> U13 Boys (DOB: 8/1/97 – 7/31/99)</li> <li><input type="checkbox"/> U15 Boys (DOB: 8/1/95 – 7/31/97)</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> U07 Girls' Clinic (DOB: 8/1/03 – 7/31/04)</li> <li><input type="checkbox"/> U08 Girls (DOB: 8/1/02 – 7/31/03)</li> <li><input type="checkbox"/> U09 Girls (DOB: 8/1/01 – 7/31/02)</li> <li><input type="checkbox"/> U10 Girls (DOB: 8/1/00 – 7/31/01)</li> <li><input type="checkbox"/> U11 Girls (DOB: 8/1/99 – 7/31/00)</li> <li><input type="checkbox"/> U13 Girls (DOB: 8/1/97 – 7/31/99)</li> <li><input type="checkbox"/> U15 Girls (DOB: 8/1/95 – 7/31/97)</li> </ul> |
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Player Assessment (Check one box)	Beginner	2	3	4	5	Travel
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I understand that I/my child will not be covered by any program insurance, and I agree that I will not hold the team, program, coach, instructor or Hickory/Fountain Green Recreation Council responsible for injuries received while participating or traveling to or from practices, games, and/or program trips. **I also understand that the program will place my child on a team and with a coach of the programs choosing.**

**REFUND POLICY:** No refunds unless program is cancelled by Hickory/Fountain Green Recreation Council.

Parent's signature required for all program participants under 18 years of age.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Registration Fee: \$ _____	<input type="checkbox"/> Cash	<input type="checkbox"/> Check	Check # _____	Check Amount: \$ _____
Number of children covered by Check # above: _____			HFG Soccer Committee Initials: _____	