



City of Lincolnton | Parks & Recreation
2019 Youth Spring Soccer
 Registration Form

FOR OFFICE USE ONLY		
Cash <input type="checkbox"/>	Check# _____	Card <input type="checkbox"/>
Amount: \$ _____	Date: ____/____/____	

Evaluation Date & Time (if applicable)

February 9th (U8) 11:00am (U11) 12:30pm (U14) 2:00pm
 February 16th (U8) 11:00am (U11) 12:30pm (U14) 2:00pm

Participant Information

Name: _____

Street Address: _____

City: _____ State : _____ Zip: _____

Gender: Female Male Date of Birth: _____ / _____ / _____ Age: _____

*As of 2/15/2019

Shirt Size: YXS YS YM YL AS AM AL AXL AXXL

Shorts Size: YXS YS YM YL AS AM AL AXL AXXL

Experience Level: 0 - First time playing 1 year 2-3 years +3 years

Please list any nights or times that the participant CANNOT practice:

Are there any medical conditions or other information that we should be aware of?

Parent/Guardian Information

Name: _____

Phone #: (_____) _____ - _____ Email: _____

Preferred method of contact: Text Voice Call Email

Relationship to participant: _____

Name: _____

Phone #: (_____) _____ - _____ Email: _____

Preferred method of contact: Text Voice Call Email

Relationship to participant: _____

Are you willing to coach? Head Coach Assistant Coach No

Release Statement & Pledge

This is to certify that the participant named above has our consent & permission to take part in the Youth Soccer League sponsored by the City of Lincolnton Parks & Rec. Dept. I hereby waive & release any & all rights & claims for damages & injuries he/she may receive while taking part in the program. I also grant & authorize the City of Lincolnton Parks & Rec. Dept. the right to take, edit, alter, copy, exhibit, publish, distribute & make use of any & all pictures or videos taken of me and/or the participant to be used in and/or for legally promotional materials including, but not limited to, newsletters, flyers, posters, brochures, advertisements, fundraising letters, annual reports, press kits & submissions to journalists, websites, social networking sites & other print & digital communications, without payment or any other consideration. This authorization extends to all languages, media, formats & markets now known or hereafter devised. This authorization shall continue indefinitely unless I otherwise revoke said authorization in writing. I understand & agree that these materials shall become the property of the City of Lincolnton Parks & Rec. Dept. & will not be returned. In addition, as a parent/guardian, I will: encourage good sportsmanship for all players, parents, coaches, spectators & officials, place the well-being of my child ahead of personal motivation, support all coaches & officials, ensure that my child participates with the intention of having fun & interacting positively with teammates, encourage a drug, tobacco, & alcohol free environment while at City of Lincolnton activities, remember that the game is for children & not adults, make youth sports fun for my child, ask my child to show respect to all, teach, train & develop my child as it relates to the sport, never take the fun out of the game by emphasizing winning, us positive reinforcement to motivate my child, do my best to have my child at games & practices & not let my child neglect school studies in order to participate. This, as signed, will apply to all family members & friends attending the game or practice. I understand that it is my responsibility to enforce these rules for them or I will leave the premises with my guests or associated parties at the request of a coach or City of Lincolnton official.

 Signature

_____/_____/_____
 Date