

SHARKS SPRING SOCCER PROGRAMS

Registration Form (separate form for each player):

Deadline: March 27th

PLAYER'S NAME:	Age on July 31, 2010:
ADDRESS:	
HOME PHONE:	
E MAIL:	
PLAYER'S GENDER, AGE and DATE OF BIRTH:	
PARENTS' NAMES:	
PARENTS' CELL #:	
NAME OF 1 ST PERSON TO CONTACT IN AN EMERGENCY:	
1 ST PHONE # TO CALL FOR EMERGENCY CONTACT:	
PLAYERS EXPERIENCE LEVEL: Please Circle. NEW OPTIMIST (BEGINNER) OPTIMIST (ADVANCED) SHARKS (OR COMP)	
<u>CHECK EACH CAMP YOU ARE REGISTERING THIS PLAYER FOR:</u>	
COMPETITIVE and ADV. REC PLAYERS	REC and NEW PLAYERS
School Of Excellence U8-U12 Thursdays (\$85)	Spring Fling Weds (rec. and new players 5-14) (\$70)
APD U13+ Thursdays (\$85)	
DISCOUNTS and FEES Late Fee +\$10 Multi camp discount – 2 camps or 2 players or more - 10% off total	
T SHIRT SIZE (Circle one): YS YM YL AS AM AL AXL	

I/We the parent(s) or legal guardian(s) of the above-named minor do hereby give my/our approval for said minor to participate in Naples Youth soccer training programs and Summer camps. I/We assume all risks and hazards relating to such participation. I/We do hereby waive, release, absolve, indemnify and agree to hold harmless NYSC, FYSA, Collier County Schools, Collier County Parks and Rec. its board, staff, coaches, members, volunteers, supervisors, sponsors, associates and representatives from any and all rights and claims for dangers resulting from injury to persons or property which may be sustained or occur during, before and after participation in camp activities, or arising from traveling to or from camp, whether said injury is due to negligence or not.

Parent/Guardian signature _____ Date _____

MAIL TO: GAVIN SPOONER, 15958 Marcello Circle, Naples, FL 34110. Checks payable to: NYSC