2012 CITY OF PARMA
YOUTH SOCCER (Divisions 1 – 2)
REGISTRATION FORM

FIRST NAME_____LAST NAME_____

ADDRESS_____CITY_____ZIP_____

PHONE (HOME)_____(WORK/CELL)_____

E-MAIL_____

BIRTHDATE_____GRADE_____SCHOOL_____

PARENTS' NAME (FATHER)_____(MOTHER)_____

CIRCLE LEAGUE YOU ARE ENTERING:

	DIV 1	DIV 2
BOYS:	(Born between 8/1/06– 7/31/08)	(Born between 8/1/04 – 7/31/06)

How many years has your child played soccer? _____

* 4 players can be "stapled" together so that they can play on the same team. If you would like to have your child stapled with 3 other players please list their names below. There can only be 4 players on staple.

1) _____ 2)_____

3)_____ 4)_____

THE CITY OF PARMA SOCCER STAFF NEEDS THE ASSISTANCE OF VOLUNTEERS. IF YOU ARE INTERESTED IN HELPING BY BEING A COACH PLEASE CHECK BELOW:

COACH:□ NAME: _____PHONE #: _____

E-MAIL ADDRESS:_____

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Soccer Jersey Order Form
(Circle One)

YOUTH MEDIUM YOUTH LARGE ADULT SMALL N/A

I/We hereby agree and promise to assume risk and responsibility for any and all injuries or damages due to injuries, suffered by the participant arising out of participation in activities involving said program, including but not limited to: classes, demonstrations, practices, or any other use of the premises, facilities, or equipment of the City of Parma Recreation Department, whether occurring on the premises of the City of Parma or at any other location.

I/We hereby release, indemnify and forever discharge and hold harmless the City of Parma, its employees, its directors, employees, students, agents and servants from any and all responsibility, liability, claims for personal injury, legal actions or suits, damages or losses of any kind or description, both at law or in equity, arising out of, or in any way connected with any of the above-mentioned acts and activities.

I/We understand and agree that the City of Parma shall be allowed to take photographs, videos and/or write stories, of events related to the above –mentioned activity. The above named participant may appear in said videos, photographs, and stories and is not entitled to any other consideration besides being able to participate in said activity.

IN WITNESS WHEREOF, I/We have set my hand and seal to this document which I/We intend to be legally binding document, on the day and year below written and understand it fully.

Be sure to notify your child's coach of any medical or other condition(s) they should be aware of.

_____ _____

Participant's Name Parent/Guardian Signature

FEE: $40.00 Resident $50.00 Non-Resident Jersey Fee: $15.00 $10.00 LATE FEE

PLEASE MAKE CHECKS PAYABLE TO "PARMA RECREATION"