



Littleton Soccer Club

PLAYER'S REGISTRATION FOR FALL 2004

Registrations for Fall 2004 Littleton Soccer are due with payment at Littleton Park & Recreation starting May 15, 2004 and ending Friday July 2, 2004. For **registrations received on or before July 2nd**, the In-Town Team Registration fee is \$40; the Travel Team Registration fee is \$45.

For **registrations received after July 2nd**, the In-Town Team Registration Fee is \$50; the Travel Team Registration Fee is \$60.

If you are **registering more than one child**, you may apply a \$5 discount to the registration fee for each additional sibling after the first.

Please submit your completed registration form(s) with payment, **either in person or by mail**, to Littleton Park & Recreation, PO Box 934, Littleton, MA 01460. You should **make your check payable to "Town of Littleton."**

Fall 2004 Birthday Cut-Off Dates:

In-Town Registration

If your child is...	Prior to...	You register for...
4 yrs old	Sep 1, 2004	Pee Wee
5 yrs old	Sep 1, 2004	U6
6 or 7 yrs old	Sep 1, 2004	U8

Travel Registration

If your child is...	Prior to...	You register for...
8 or 9 yrs old	Aug 1, 2004	U10
10 or 11 yrs old	Aug 1, 2004	U12
12 or 13 yrs old	Aug 1, 2004	U14
14 or 15 yrs old	Aug 1, 2004	U16

Age Group: (circle one) PeeWee U6 U8 U10 U12 U14

What grade is player in as of September 2004? (e.g., 1st, 2nd, 3rd ...) _____

Has player participated in organized soccer before? (circle one) Yes No

Player's Name: _____

Birth Date: _____ **Age:** _____ **Sex (circle one):** F M

Address: _____

Home Phone: _____ **E-Mail:** _____

Parent/Guardian: _____

Work Phone 1: _____ **Work Phone 2:** _____

Emergency Contact: _____ **Phone:** _____

Medical Concerns/Allergies: _____

Pediatrician: _____ **Phone:** _____

[...continued on reverse...]



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REGISTRATION FORM CONTINUED

I, the parent/guardian of the registrant, a minor, agree that the registrant and I will abide by the rules of the United States Youth Soccer Association (USYSA), its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for the USYSA accepting the registrant for its soccer programs and activities, I hereby release, discharge and/or otherwise indemnify the USYSA and the Town of Littleton, their affiliated organizations and sponsors, including employees and/or volunteers, and associated personnel, including owners of fields and facilities utilized for the program, against any claim by or on behalf of the registrant as a result of the registrant's participation in the program and/or being transported to or from the same, which transportation I hereby authorize.

Name: _____ **Signature:** _____

As the parent or legal guardian of the registrant, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Dentistry. This care may be given under whatever conditions are necessary to preserve life, limb, or well being of my dependent.

Signature: _____ **Date:** _____



Volunteer Opportunities: Please consider volunteering for Littleton Soccer. Contact your child's coach or an LSC Board member (also volunteers!), or complete the form below. We will contact you to answer any questions and address any concerns you may have. You are under no obligation to serve by indicating your interest. We appreciate your consideration and any help you may choose to offer.

Name: (if different from front) _____

Address: _____

Home Phone: _____ **Work Phone:** _____

Email: _____

Please check the area(s) in which you'd be interested in volunteering:

- | | | |
|---|---|--|
| <input type="checkbox"/> Coach | <input type="checkbox"/> Referee | <input type="checkbox"/> Board Member |
| <input type="checkbox"/> Assistant Coach | <input type="checkbox"/> World Cup Day | <input type="checkbox"/> Other: _____ |

Thanks for your consideration. See you at the fields!

Refunds: Littleton Park & Recreation will consider refunds on a case-by-case basis prior to the start of the fall 2004 season, with a physician's supporting statement.