

# SOCCER REGISTRATION FORM

PO Box 222, Weare, NH 03281

www.weareathleticclub.com

## WEARE ATHLETIC CLUB



Please print legibly and provide two copies

**NOTE: No Jewelry Is allowed to be worn during Practice or Play, plan any ear piercing accordingly.**

Fees: **\$45** (Grades 3-8)

Registration forms due: **July 15**

**NOTE:**

**\$35** (Grades 1-2)

Late fee: **\$10**

Late registration does not guarantee a spot on a team.

**\$20** (Ages 4 - Kindergarten)

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Age: \_\_\_\_\_ Male: \_\_\_\_\_

Grade (This Spring): \_\_\_\_\_ Female: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Grade (This Fall): \_\_\_\_\_ D.O.B. \_\_\_\_\_

Father's Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

### EMERGENCY PHONE NUMBERS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any applicant medical problems or prohibitions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### PARENTAL SUPPORT/ASSISTANCE

The W.A.C. is a volunteer non-profit organization. Parental participation is essential in assuring a quality athletic and learning experience for your children. Your time commitment can be large or small, depending on what you can do. **WE NEED YOUR HELP!!** Please check off the area(s) in which you can help.

Coach: \_\_\_\_\_ Assist. Coach: \_\_\_\_\_

Team Parent: \_\_\_\_\_ Concessions: \_\_\_\_\_

Fund Raising: \_\_\_\_\_ Corp. Sponsor: \_\_\_\_\_

Maintenance: \_\_\_\_\_ Official: \_\_\_\_\_

Transport: \_\_\_\_\_ Committee: \_\_\_\_\_

\*\*\* Please try to check at least one

By signing this form the parent/guardian acknowledges that neither the Town of Weare nor persons representing or associated with the Weare Athletic Club will be held liable for any injuries that may be incurred as a result of the student athlete's participation in the sports program.

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

# Soccer Registration Form

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E-Mail Address: \_\_\_\_\_

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D.O.B. \_\_\_\_\_

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