



FALL 2005 REGISTRATION

PLAYER INFORMATION			
Last Name:	First Name:	MI:	
Address:			
City:	State:	ZIP Code:	
Phone:	Sex:	Birth date: / /	
Grade (as of Fall '05):	School:		
PARENT INFORMATION			
Father's Last Name:		First Name:	
Home Phone:	Work Phone:	Cell Phone:	
Email:			
Father will help with: Team <input type="checkbox"/> League <input type="checkbox"/> Referee <input type="checkbox"/> How?			
Mother's Last Name:		First Name:	
Home Phone:	Work Phone:	Cell Phone:	
Email:			
Mother will help with: Team <input type="checkbox"/> League <input type="checkbox"/> Referee <input type="checkbox"/> How?			
EMERGENCY CONTACT			
Name of emergency contact:			
Relationship:		Phone:	
Physician Name:		Physician Phone:	
Note (allergies, disabilities, etc.):			
FEE SCHEDULE			
Date of Birth	Age Group	Fee	Amount Paid
8/1/95 – 7/31/97	U10	\$ 35.00	
8/1/93 – 7/31/95	U12	\$ 45.00	
8/1/91 – 7/31/93	U14	\$ 45.00	
8/1/89 – 7/31/91	U16	\$ 50.00	
8/1/87 – 7/31/89	U19	\$ 50.00	
HOW TO REGISTER			
1. In person: Ballard Soccer Club Spring Sign-up Saturday, May 14, 2005 12 pm – 2 pm 3C Lounge, 515 North Main, Huxley			
2. By mail: Mail registration form and check to Ballard Soccer Club P.O. Box 325 Slater, IA 50244			
3. Online registration also available at http://www.ballardsoccerclub.org			
Administrative Use Only			
Date Received			
Registration Fee			
(-) Donation			
(-) Volunteer Credit			
Total Received			
Check #			
Registrar Initials			
Save \$5.00 - Sign up for Fall 05/Spring 06, take \$5 off the spring fee & secure a spot for your child in the spring.			
Volunteer Credit - Be an active member of the BSC Board and receive free registration. One player per household. Contact BSC for current openings.			

IMPORTANT - SIGNATURE REQUIRED

I hereby consent to my child participating in the Greater Des Moines Junior Soccer League and the Ballard Soccer Club. I also grant permission to the Ballard Soccer Club to use the image of my child. Such use includes the display, distribution, publication, or otherwise use of photographs, images, and/or video taken of my child for use in materials that include printed materials such as brochures and newsletters, videos, and digital images such as those on the Ballard Soccer Club Web site.

Parent/guardian signature _____

Date _____