

# Ballard Soccer Club Spring 2008 Registration

## 3 ways to register! Registration Ends 2/15/08!

1. **In person:** BSC Spring Sign-up: Saturday, January 26 2008, 9-11am Southside Park, Slater IA 50244
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>

### Player Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Sex: M/F  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: IA ZIP Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Birth date: / / E-Mail: \_\_\_\_\_

### Parent Information:

**Father's Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_  
**Month/Date of Birth:** / / **Cell Phone:** \_\_\_\_\_  
**Mother's Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_  
**Month/Date of Birth:** / / **Cell Phone:** \_\_\_\_\_

### Emergency Contact Information:

**Name of emergency contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Physician Name:** \_\_\_\_\_ **Physician Phone:** \_\_\_\_\_  
**Notes (allergies, disabilities, etc.):** \_\_\_\_\_

Volunteer Information: \*Must be complete to register your child. If you are chosen to volunteer you will receive your registration FREE!

**Coach**     **Asst Coach**     **Team Parent**     **Board Member**     **Referee**

**UNIFORM FEES: \$30.00 (Includes - 2 jerseys, one short, one pair socks)**  
 Not required for U10 AND if player has one from previous season.

Date of Birth	Age Group	Boys/Girls (Circle one)	Uniform Size	Fee	Uniform
8/1/97- 7/31/99	U10	<b>B G</b> (Coed teams will be formed if numbers are not adequate to make boys and girls teams. )	NA	35.00	NA
8/1/95 - 7/31/97	U12	<b>B G</b> (Coed teams will be formed if numbers are not adequate to make boys and girls teams. )	Youth: M, L Adult: S, M	45.00	\$30.00
8/1/93 - 7/31/95	U14	<b>B G</b> (Coed teams will be formed if numbers are not adequate to make boys and girls teams. )	Youth: L Adult: S, M, L, XL	45.00	\$30.00

### OFFICE USE ONLY:

Date received:	Check #:	Total Registration Fee:	Volunteer Credit:	Registrar Initials:	
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### 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 \_\_\_\_\_