



Killaloe Soccer Club Registration Form

955 Lisk Rd. Killaloe ON K0J 2A0 Mobile: 613-401-2605 register@killaloesoccerclub.ca

Participant #1 Information

Player Name: _____ Male Female X
 Date of Birth: _____ Age: _____ Grade: _____
01 / Feb / 2010
 Shirt Size: XS (3-4) S (6-8) M (10-12) L (14-16) XL (18-20) Other _____
 Name on Shirt: _____

Allergies/Injuries

*Special Requests

Participant #2 Information

Player Name: _____ Male Female X
 Date of Birth: _____ Age: _____ Grade: _____
01 / Feb / 2010
 Shirt Size: XS (3-4) S (6-8) M (10-12) L (14-16) XL (18-20) Other _____
 Name on Shirt: _____

Allergies/Injuries:

*Special Requests:

Participant #3 Information

Player Name: _____ Male Female X
 Date of Birth: _____ Age: _____ Grade: _____
01 / Feb / 2010
 Shirt Size: XS (3-4) S (6-8) M (10-12) L (14-16) XL (18-20) Other _____
 Name on Shirt: _____

Allergies/Injuries:

*Special Requests:

Guardian Information

Name: _____
 Street Address: _____ Town/City: _____
 Postal Code: _____
 Phone #: _____ Mobile #: _____
 Email Address: _____

- Media Consent:** I consent to the publication of photography/articles which include my son/daughter/self
 I do NOT consent to the publication of photography/articles which include my son/daughter/self

I, the undersigned give my child permission to play soccer with the Killaloe Minor Soccer Club. I understand that injuries may occur while playing soccer. I will not hold the Killaloe Soccer club and its volunteers, coaches, sponsors, helpers, participants and owners of the playing field used responsible for injuries. I, the undersigned will be present or have a guardian present while my child participates in the soccer program.

Parent/Guardian Signature: _____ Date: _____

Payment

	#	Subtotal
Registration Fee \$50 - U6 (YOB 2014 - 2016)		
Registration Fee \$60 - U8, U10, U12, U15(YOB 2005-2013)		
Coach Discount \$10 per child		-
Late Fee \$10 per child (after May 3rd)		+
TOTAL		

Payment Options:

- Cheque
 Cash
 e-Transfer

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