



**FORT SMITH
BOYS & GIRLS CLUBS**

SOCCER REGISTRATION

| For Official Use Only | |
|-----------------------|------------------------|
| DATE _____ | REGISTRATION NO. _____ |
| PLAYER AGE _____ | PLAYER GRADE _____ |
| FSBGC CARD NO. _____ | YEAR 20____ |
| _____ DRAFTEE | |
| _____ RETURNER | TEAM: _____ |
| RECEIPT NO. _____ | STAFF INITS _____ |

PLEASE PRINT IN INK & FILL OUT FORM COMPLETELY

MEMBER NAME _____ NICKNAME _____
First Last

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP _____

AGE _____ DOB _____ SCHOOL _____ GRADE _____

PARENT/GUARDIAN (1) _____ PHONE _____ (OR) _____

PARENT/GUARDIAN (2) _____ PHONE _____ (OR) _____

EMERGENCY CONTACT _____ PHONE _____ (OR) _____

PLEASE CHECK APPROPRIATE AGE GROUP (Returning players *MUST* play for last year's team)

| | | |
|--------------------------|-----------------------|----------------------------------|
| _____ CO-ED MINOR LEAGUE | 1st, 2nd, & 3rd grade | cannot be 10 before December 1st |
| _____ CO-ED MAJOR LEAGUE | 4th, 5th, & 6th grade | cannot be 13 before December 1st |
| _____ GIRLS MAJOR LEAGUE | 4th, 5th, & 6th grade | cannot be 13 before December 1st |
| _____ JUNIOR LEAGUE | 7th, 8th, & 9th grade | cannot be 16 before December 1st |

Last Year's FSBGC Team _____

Discuss questions, problems, or any other aspect of the program with the coach or a FSBGC staff member. Transportation of participant(s) to/from practices/games are the responsibility of the parent/guardian. Members should bring their FSBGC Membership Card with them each time they attend the Club. Contact the coach if the player is unable to attend a practice/game. Exhibit positive behavior when attending practices, games or at the Club. Abuse of Referees, Coaches or FSBGC Staff will not be tolerated. Violators will forfeit their involvement in the FSBGC program(s). Coaches and officials are not professionals, and donate their time voluntarily for the benefit of the participants. **** I hereby give the above FSBGC member permission to participate in this FSBGC activity. ****

PRINT NAME _____ SIGNATURE _____ DATE _____

