



# EAST ELGIN YOUTH SOCCER REGISTRATION 20\_\_

CLUB USE  
v1.0-2013

Home Phone: ( ) Email address:

Parent/Guardian Name:

Last Name (please print)

First Name

Last Name (please print)

First Name

Street Address: Rural 911#:

Town/Municipality: Postal Code:

Player Information: (Please provide any additional information the Club/Coaches should be aware of e.g. allergies)

#1 First Name (please print) Last Name (if different from Parents above) DOB: Year / Month / Day Boy Girl

☐ BC ☐ U Div

#

☐ BC ☐ U Div

#

☐ BC ☐ U Div

#

☐ BC ☐ U Div

#

Cash

Cheque

\$

**PARENTAL CONSENT TO PLAY:** I the undersigned parent or legal guardian of the above named minor(s), do hereby consent and agree that they may participate in the House League Program of East Elgin Soccer. It is agreed that EES and its sponsors assume no responsibility for injury as a result of such participation. It is further agreed that all rules, regulations and codes of conduct will be followed by players(s) and parent(s).

**ONLINE REGISTRATION:** Where payment and registration are submitted online that will be considered as providing the required approvals and agreements in accordance with the parental consent provisions above.

Signature: Date:

Print Name:

**PARENTAL VOLUNTEERS:** The youth soccer program depends on strong support and assistance of Parent Volunteers, without which there would be no program. Please consider how you might contribute your time and talents to help deliver the soccer program during the upcoming year.

**I Am Interested In:**

Helping Coach U5 U7 U9 U11 U13 U15 U18 Annual H.L. Tournament Refereeing (paid)

Open Columbus Fields (A Saturday in the spring) Other (please specify):

**FEES:** Club Fees Due at Time of Registration (**LATE** Fees of \$10/child apply to all registrations received after April 15<sup>th</sup>).

Make Cheques Payable to East Elgin Youth Soccer

1 Child .....\$ 60.00 2 Children..... \$120.00 3 Children .....\$180.00 4 or more (family rate) .....\$200.00

**Club Contact** East Elgin Soccer Website: [www.eeys.ca](http://www.eeys.ca)  
**Information:** PO Box 334 email: registrar@eeys.ca  
Aylmer ON N5H 2S1

Date: per Registrar

Entered  
Receipted

\*\*\* MAIL registration with fees to above P.O. Box **or** DROP OFF at identified locations until April 15 \*\*\*

**SUBMIT WHITE COPY AS REGISTRATION — KEEP YELLOW COPY FOR YOUR RECORDS**