

2007 MCC FALL YOUTH SOCCER REGISTRATION FORM

(Please fill out and mail or deliver registration to Mid-Lakes Christian Church, 3800 State Road 19, Tavares, FL, 32778)

Name _____ Sex: M/F Birthdate ___/___/___ Age: _____

Grade: _____ Special Health Needs: _____

Address: _____ City _____ State _____ Zip _____

Parent Name: _____ Home # : _____
Work#: _____ Email: _____

If parents can't be reached, call: _____ Phone#: _____

Best Practice Nights: (no guarantees) _____

Earliest time for practice available: _____

Shirt Size (circle one): Youth X-Small Youth Small Youth Medium
 Youth Large Adult Small Adult Medium

Agreement

1. I certify that the participant named above is in normal health and capable of safe participation in the MCC Youth Soccer League. The participant and/or parent agree to assume the risk of death or personal injury in this league and in whatever location or time it is held. The participant also acknowledges the extreme risk and danger inherent in the activity which includes; but not limited to, the following: Injuries resulting from running, tripping, slide tackling, kicking, heading and all other activities and forms of motion associated with the sport of soccer.
2. I assume all risk(s) and hazard (s) incidental to the conduct of this program and release, discharge and covenant not to sue Mid-Lakes Christian Church or the instructors forever from liability for any and all loss or damage, personal injury, property damage or wrongful death whether caused by any negligence, either active or passive of MCC and the instructors, or otherwise.
3. I agree to indemnify and hold Mid-Lakes Christian and instructors harmless from any damages or costs arising out of the participant's (child or myself) injury.
4. I support the MCC's Sports philosophy, which is based on participation, fun, physical fitness and health, skill development, teamwork, fair play, family involvement and volunteer leadership. I agree to conduct myself with these principles in mind at all times and will not disrupt this or any other MCC program or activity.
5. I give permission to Mid-Lakes Christian Church to use the photograph or likeness of my child for the purpose of educational or promotional matter.
Yes or No
6. I am willing to participate as a coach or a helper in this program. Yes or No

Parent's Signature: _____ Date: _____

For Office Use Only: Amount Paid at Registration: _____ Date: _____ Balance Due: _____

Team Assigned: _____ Coach: _____ Checked by _____