2015 SPRING - INDIVIDUAL REGISTRATION

SOCCER ☐ YOUTH INSTRUCTIONAL SOCCER CLINIC/\$135 ☐ 4-6 year old boys & girls 4PM ☐ 7-10 year old boys & girls 5PM	If registering as part of a team, write your team name or team contact name under "requests" on the back of the form
☐ SEMI-PRIVATE SOCCER TRAINING ** CONTACT SST DIRECTLY FOR REGISTRATION	Special Requests:
<u>LACROSSE</u>	
☐ MENS "BOX" LACROSSE/\$125 ☐ Field Player ☐ Goalie (Free)	
☐ INTRO LACROSSE / SOFT LACROSSE / \$140	
☐ K-3rd Boys & Girls	
☐ 4th-8th Boys & Girls	
FIELD HOCKEY	
□ WOMEN'S OPEN LEAGUE/\$125	
□ Field Player □ Goalie □ Below Avg. □ Average □ Above Avg.	
☐ 6TH-8TH GRADE LEAGUE/\$125	
☐ Field Player ☐ Goalie	
FOOTBALL	ACD "No School Fun Days"
☐ YOUTH FLAG FOOTBALL/\$150 ☐ 3rd/4th Grade ☐ 5th/6th Grade If reg. part of a team, write contact name under requests ☐ Parent Coach Volunteer/Flag Football	**SEPARATE REGISTRATION FORM OR REGISTER ON-LINE
Name:	HOMESCHOOL GYM CLASS
☐ FOOTBALL ACADEMY / \$250 ☐ QB ☐ Receiver ☐ Youth QB & Receiver Camp ☐ High School QB/Receiver Buddy Camp	**SEPARATE REGISTRATION FORM OR REGISTER ON-LINE
Partner's Name	ACD SUMMER CAMP
REC SPORTS CAMP	SEE FRONT DESK FOR INFORMATION AND REGISTRATION PACKET OR REGISTER ON-LINE

☐ 5-7 year old/\$125 ☐ 8-10 year old/\$125

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Download additional registration forms online: www.goodsportsusa.com

Parent/Guardian	SHIRT SIZE: (circle one) Youth: S M L Adult: S M L XL XXL
(if under 18):	What club do you play for?
Participant's Name:	What school do you attend?
Date of Birth:/ Age: Boy Girl	PAYMENT INFORMATION: NO REFUNDS WILL BE GIVEN. All balances MUST be paid in full at time of registration.
Email Address:	Total Amount Due: \$
	☐ Cash ☐ Check (No refunds will be given)
Address:	☐ Credit Card: ☐ Visa ☐ MC ☐ Discover
City: State: Zip:	Card Number: Exp. Date:
	Authorized Signature:
Phone: Home Cell	1
Home ceii	X
Please let us know how you heard about us? Website	☐ Facebook ☐ Direct Mail Piece ☐ Newspaper ☐ Friend
☐ Rec. Department ☐ Allaire Country Day ☐ Birthday F	Party 🗖 Other
Please read carefully and sign the following Registration-Understanding/Waiver.	
while they/I am on the premises of GOODSPORTS USA. I acknowledge that at GoodSports USA, I/they will participate in activities that may involve, among other things physical contact with persons or objects, including the ground, and may incur a risk of injury. I specifically waive, give up and release GoodSports USA and its staff, from a liability for any claim for damages which I/the above named child may have relating to injuries or illness that I/they may sustain. In signing this waiver, I certify that I/th above child are in good health, with no chronic illness or abnormal tendencies. In the event of an emergency in which I/the above child requires medical care, I authoriz GOODSPORTS USA to act for me and obtain whatever medical, surgical or dental examination, diagnosis and/or treatment is deemed necessary. GOODSPORTS USA is not responsible for my personal belongings which are lost, stolen, or damaged. I agree to have all fees paid in full before the first game. I further understand that I should be aware of my/the above named child's physical limitations and agree not to exceed them. I agree to review the rules and inspect the facilities and if I believe it is unsafe I will advise his or her coach and refuse to participate. GoodSports reserves the right to cancel or change any scheduled events. NO REFUNDS!!	
Signature:	Print Name:
You MUST mark which program(s) you are registering for on back side of form.	
NOTE: Many sports have multiple options, ages, levels, times, etc. Be sure to mark all fields for the sport(s) you are signing up for.	
• USE ONE FORM PER PERSON. Please call us for additional forms if needed or download forms online.	
• DO NOT USE THIS FORM FOR: Team registration, parties, facility rental, homeschool gym class, ACD Fun Days.	
• To register for any of these please contact GoodSports direct	tly or visit our website for online registration.
REQUIRED EQUIPMENT	
SOCCER: Shin Guards, Soccer Ball, Cleats or Indoor Shoes BOYS LACROSSE: Stick, Mouth Guard, Helmet with Cage, Sh GIRLS LACROSSE: Stick, Mouth Guard, Goggles (Goalkeeper FIELD HOCKEY: Stick, Shin Guards, Mouth Guard, Goggles (GOOTBALL: Athletic attire, cleats or sneakers, size appropriate	rs need own equipment) Goalkeepers need own equipment)
Special Requests: (Team Name & Contact if Applicable)	

FULL PAYMENTS AND REGISTRATION FORM MUST BE SUBMITTED AT TIME OF REGISTRATION FOR ALL "INDIVIDUAL PROGRAMS".

MAIL ALL FORMS AND PAYMENTS TO: GOODSPORTS USA • 2903 Highway 138, Wall, NJ 07719 • Tel: 732-681-8898 • Fax: 732-681-8895