

'18-'19 WINTER/SPRING - INDIVIDUAL REGISTRATION

SOCCER

Youth Instructional Soccer Clinic/\$140

- FRIDAY CLINIC:** Winter 1 Winter 2 Spring
 4-6 year old boys & girls 7-10 year old boys & girls
SATURDAY CLINIC: Winter 1 Winter 2
 6-9 year old boys & girls

Munchkin Soccer / \$140

- Session 1 Session 2

Winter Soccer Academy / \$245

- Session 1 Session 2
Travel Team Name & Age Group: _____

Winter Break "Go for the Goal" / \$150

- Striker Goalkeeper
Travel Team Name & Age Group: _____

Recreation Soccer / \$115

- Girl Boy / PreK/K 1st 2nd 3rd 4th

Parent Coach/Volunteer Name: _____

If coming as a group, write team name and contact name under requests.

Semi-Private Soccer Training / \$224

- Session 1 Session 2

Mon: '11-'10 '09-'07 '06-'05 '04-'01

Tues: '11-'10 '10-'09 '08-'06 '05-'02

Wed: '11-'10 '10-'09 '08-'06 '05-'02

Sat: '11-'10 '10-'09 '08-'06 '05-'02

Sun: '11-'10 '10-'09 '08-'06 '05-'02

Mid Season Speed & Agility Camp / \$95

FIELD HOCKEY*

Women's Open League/\$150

- Winter Spring / Field Player Goalie
 Below Avg. Average Above Avg.

If coming as a group, write team name and contact name under requests.

High school League/\$150

- Field Player Goalie / JV Varsity

If coming as a group, write team name and contact name under requests.

6th-8th Grade League/\$150

- Field Player Goalie

If coming as a group, write team name and contact name under requests.

Semi-Private Field Hockey Training / \$225

- Thursdays:** Session 1 Session 2

6th-8th @ 5PM 9th-12th @ 7PM

6th-8th @ 6PM 9th-12th @ 8PM

- Sundays:** Session 1 Session 2

6th-8th 8AM 9th-12th 9AM 9th-12th 10AM

Goalkeeping + Shooting Clinic / \$150

- Field Player Goalkeeper

Field Hockey 101 / \$154

- Session 1 Session 2

Instructional Field Hockey / \$154

- 5th-7th 8th-10th

LACROSSE*

LACROSSE UNIVERSITY

Lacrosse 101 / \$154

- Boys & Girls K-3rd: Session 1 Session 2
 Boys & Girls 4th-9th: Session 1 Session 2

Lacrosse 201 Speed & Agility / \$240

- Girls 3rd-6th Session 1 Session 2
 Girls 7th-10th Session 1 Session 2
 Boys 3rd-6th Session 1 Session 2
 Boys 7th-10th Session 1 Session 2

Lacrosse University 2 Day Mini Camp

- Newcomer Lacrosse Pre-K-8th Boys & Girls / \$75
 Game Ready Lacrosse - 3rd-12th / \$100
 Boys Girls

"BOX" Lacrosse/\$150

- Field Player Goalie (Free)
 Mens: Winter I Winter II Spring
 Elite Boys High School
 Elite Youth: 5th/6th 7th/8th

Parent Coach/Volunteer Name: _____

If coming as a group, write team name and contact name under requests.

Boys Lacrosse Field Leagues / \$175

- Field Player Goalie
 3rd/4th 5th/6th 7th/8th
 High School: JV Varsity Elite

If coming as a group, write team name and contact name under requests.

Girls Lacrosse Field Leagues

- Field Player Goalie
 5th/6th/\$175 7th/8th/\$175
 Girls High School/\$150: JV Varsity

Parent Coach/Volunteer Name: _____

If coming as a group, write team name and contact name under requests.

FOOTBALL

Youth Flag Football/\$150

- 3rd/4th Grade 5th/6th Grade

If coming as a group, write team name and contact name under requests.

Parent Coach/Volunteer Name: _____

Football Academy / \$250

- QB Receiver

Youth QB & Receiver Camp

High School QB/Receiver Buddy Camp

H.S. Partner's Name _____

MUST register as a pair

***If registering as part of a team, write your team name or team contact name under "requests" on the back of the form**

'18-'19 WINTER/SPRING - INDIVIDUAL REGISTRATION FORM

Download additional registration forms online: www.goodsportsusa.com

Mail all forms & payments to: **GoodSports USA • 2903 Hwy 138, Wall, NJ 07719 • Tel: 732-681-8898 • Fax: 732-681-8895**

Parent/Guardian (if under 18): _____	SHIRT SIZE: (circle one) Youth: S M L Adult: S M L XL XXL
Participant's Name: _____	What club do you play for? _____
Date of Birth: ____/____/____ Age: _____ <input type="checkbox"/> Boy <input type="checkbox"/> Girl	What school do you attend? _____
Email Address: _____	PAYMENT INFORMATION: NO REFUNDS WILL BE GIVEN. All balances MUST be paid in full at time of registration.
Address: _____	Total Amount Due: \$ _____
City: _____ State: _____ Zip: _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check (No refunds will be given)
Phone: _____	<input type="checkbox"/> Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Discover <input type="checkbox"/> AMEX
Home _____ Cell _____	Card Number: _____ Exp. Date: _____
	Authorized Signature: _____
	X _____

Please let us know how you heard about us? Website Facebook Direct Mail Piece Newspaper Friend
 Rec. Department Allaire Country Day Birthday Party Other _____

Please read carefully and sign the following Registration Agreement:

In consideration for being allowed to participate in any way in GOODSPORTS USA athletic/sports programs, and related events, I the undersigned voluntarily agree to assume full and complete responsibility for any injury or accident which may occur to the above named child during or in connection with GOODSPORTS USA or it's staff 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 all 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/the 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 authorize 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 TEAM.** Please call us for additional forms if needed or download forms online.
- **DO NOT USE THIS FORM FOR:** Individual registration, parties, facility rental, homeschool gym class, ACD Fun Days.
- To register for any of these please contact GoodSports directly or visit our website for online registration.

REQUIRED EQUIPMENT

SOCCER: Shin Guards, Soccer Ball, Cleats or Indoor Shoes

BOYS LACROSSE: Stick, Mouth Guard, Helmet w/ Cage, Shoulder Pads, Gloves, Elbow Pads, Athletic Cup

GIRLS LACROSSE: Stick, Mouth Guard, Goggles (Goalkeepers need own equipment)

FIELD HOCKEY: Stick, Shin Guards, Mouth Guard, Goggles (Goalkeepers need own equipment)

FOOTBALL: Athletic attire, cleats or sneakers, size appropriate, labeled football required for football academy.

Special Requests: (Team Name & Contact if Applicable) _____

