FOREST RIDGE SOCCER 2015-2016 REGISTRATION

Fall Season: August 10 - October 17, 2015

COACH or Assistant (2 per team)*

Name:

Early Registration Deadline: Saturday, August 8, 2015

(2015 Fall Registration carries over and automatically covers the 2016 Spring Season at no additional charge)

Other Association*

TEAM PARENT

Name:

Forest Ridge Association

	Individual	Family	Individual	Family
Early Registration Fee	\$35	\$90	\$40	\$100
Regular Fee	\$45	\$115	\$50	\$125
*Other Association: Villages of Forest Ridge, Valley View, Quail Hollow/Willow Glenn, Wynwood, etc.				
Please complete entire form and mail, along with check or money order made out to "FRA Soccer",				
to 3430 Berrywood Dr., Dayton, OH 45424.				
Questions? Call 937-723-9768, or send an email to: <u>frasoccer@gmail.com</u> .				
Please see https://forestridgeassociation.org/recreation/soccer/ for additional information, forms, policies, calendar, etc.				
				☐ Home ☐ Work
Player		Phone #		Cell
Address				
Age (as of 1 Sept 2015): (must be between 5 and 12) Years soccer experience				
Age (as of 1 Sept 2013) (must be between 3 and 12)				
Are there any health problems we should be aware of?				
Reversible Jersey - \$20.00 (Jerseys run small – order a size up)				
Youth: O Sm	. all Anadhum	O	Alas a de la sea Davis asil	ala Janaan
Youth: O Sm	nall O Medium	C Large	Already have Reversil - no charge	ole Jersey
Adult: OSma	all OMedium OL	arge OxL A	•	n alaata
Adult: Sina			ll players need their owl in guards, black shorts,	
		311	III guarus, biack srioris,	and socks
I have enclosed a check for \$, made out to "FRA Soccer".				
I, the undersigned, desiring to participate in the Forest Ridge Association Soccer Program, hereby agree to abide the rules, regulations, policies, and				
operating procedure of the Forest Ridge Association during the current 2015-2016 season. I further agree to release Forest Ridge Association, any				
related person, firm, institution, or organization from all liabilities for injuries sustained during the current 2015-2016 season.				
I certify that the above information is true and correct. I have read, understand, and agree to the above legal statement for my child and give				
unconditional permission for my child to participate in the Forest Ridge Association Soccer Program.				
Parent's/Legal Guardian's Sigr	nature	Please print Parent's/Legal	Guardian's Signature	Date

Parental help is essential to guarantee the continued existence of the program.

As a parent/guardian, are you able to help in any of the following ways? (circle as appropriate)

REFEREE

Name:

*Subject to satisfactory Criminal Background Check (Form Required)

PLEASE VOLUNTEER!