

*Saints Rose Of Lima School  
CAL Soccer Registration Form  
2018 Season*

If you are in grades 4 thru 8 and are interested in joining the soccer team, please complete the form below and return it to school/parish by **FEBRUARY 5, 2018**

The 2017 season will begin on **March 2018** and conclude by the middle of **May 2018.**

**Player Information:**

Player's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ M/F

Player's Address: \_\_\_\_\_

Parent's Address (if different): \_\_\_\_\_

Grade: \_\_\_\_\_ Did the Player Run Last Year? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**Parent Information:**

Father's Name: \_\_\_\_\_ Home # \_\_\_\_\_

Cell #: \_\_\_\_\_ would it be ok for the Coach to text you **Yes or No** (Please circle one)

Father's e-mail address: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Home \_\_\_\_\_

Cell #: \_\_\_\_\_ would it be ok for the Coach to text you **Yes or No** (Please circle one)

Mother's e-mail address: \_\_\_\_\_

Any medical condition player's coach should be aware of? \_\_\_\_\_

**Player's T-shirt Size:**

Y - Small \_\_\_\_\_ Y-Med \_\_\_\_\_ Y - Large \_\_\_\_\_

A - Small \_\_\_\_\_ A \_ Med \_\_\_\_\_ A - Large \_\_\_\_\_ A - XL \_\_\_\_\_

**Costs:**

\$45 per player

Amount Paid: \$ \_\_\_\_\_ Cash: \_\_\_\_\_ Check Number: \_\_\_\_\_

**Checks to be made out to: ST. Rose of Lima School**

**\*\*\*\* SIGN PERMISSION FORM ON REVERSE SIDE \*\*\*\*(unless  
printed from website, please print all pages)  
\*\*\*\* Year End Celebration will be held on June \*\*\***