

Macedon Recreation Youth Soccer



July 6 - August 14, 2009
Monday through Thursday



Cost: \$35 One Child - \$60 Two Children - \$85 Three Children - \$100 Four Children
Checks payable to Macedon Recreation

REGISTRATION:

BY MAIL, AT TOWN OFFICES
OR ON THESE DATES: _____

{ April 18, Macedon Town Hall, 9 AM - Noon
April 25, Palmyra Community Center, 9 AM - Noon
May 2, Macedon Town Hall, 9 AM - Noon

(If you can't make this date, please fill out the form below and mail to Macedon Recreation, 32 Main St., Macedon, NY 14502)

*****LAST DAY TO REGISTER IS MAY 23*****

YOUTH SOCCER

Name: _____ Age: _____ Date of Birth: _____

Grade: _____ School: _____

Address: _____ Phone: _____

Shirt Size (circle one): S (6-8) M (10-12) L (14-16) (youth sizes)
Small Medium Large (adult sizes)

Parent/Guardian Signature: _____

E-mail Address: _____

Your coach will contact you once leagues are formed and registration is completed.

We need volunteers!!!! Please check any areas you would be interested in helping out.

Referees Coaches Concession Stand Workers Team Parents

Name: _____ Phone No.: _____

Coaches Shirt Size (circle one): Small Medium Large XLarge XXLarge

Call Norb Miller, Recreation Director, at 986-5932, ext 116 or cell (315) 573-3112 for more information.

The above signed as a representative of the youth entered into the program: 1) releases the game location site owner and Macedon Recreation, its employees, agents, officers and volunteers from all liability, claims, expenses, and actions which may arise from injury or harm to the participants as a result of tournament participation, 2) assumes responsibility for medical emergency care and subsequent payment for treatment administered.