

Soccer Registration

Please Return to

Boys & Girls Club of Livingston County
1303 Indiana Avenue - P.O. Box 311
Pontiac, IL 61764
815-842-3089
lcboysandgirlsclub.com

Child's Name: _____ Boy: _____ Girl: _____

Parent/Guardian Name (s): _____

Address: _____ City: _____

Home / Cell Phone Number: _____ Grade: _____

School: _____ Birthday: _____

Please indicate which division your child will be participating in:

_____ 5 & 6 Year Olds _____ 7 & 8 Year Olds _____ 9 & 10 Year Olds

Shirt Size:

Youth Sizes

Adult Sizes

_____ 6-8 (YS)

_____ Small

_____ X-Large

_____ 10-12 (YM)

_____ Medium

_____ XX- Large

_____ 14-16 (YL)

_____ Large

As a parent, I would like to volunteer my services as:

_____ Head Coach

_____ Co- Coach



Registration fee is \$25 for members and \$45 for non-members. The additional \$20 is applied towards a yearly membership to the club. **Registration period will end August 13. All registrations received after August 13 will be charged an additional \$10 late registration fee.**

Games will tentatively start after Labor Day weekend. Games will be on Tuesdays and Saturdays.

Every effort will be made to place teams into the appropriate age categories. However, depending on registration we might have to combine ages.

Please be advised and understand that by signing this form, you are releasing the Boys & Girls Club of Livingston County, Pontiac, IL, its employees, board of directors and volunteers from liability concerning this program. Understanding that there is a slight risk of injury, as is the norm with athletic programs such as this.

Parent/Guardian Signature:

Date:

Office Use Only				
Mbr. Exp: _____	Amt. Pd. : _____	Cash: _____	Ck# _____	Initials: _____