



St. Rita CYO

www.saintrita.org

ST. RITA CYO SOCCER REGISTRATIO



St. Rita CYO

SIGN UP EARLY – LIMITED SPACE AVAILABLE

2007 – 2008 ST. RITA CYO

REGISTRATION
Mail-in Must be received by August 1, 2007
Mail to St. Rita Church
1008 Maple Drive, Webster, NY 14580

PLEASE COMPLETE
REGISTRATION FORM (BACK)
FOR EACH CHILD.

2007 - 2008 ST. RITA CYO
(Grades 3 - 6 as of 9/1/07)

ST. RITA PARISHIONER / SCHOOL
ST. PAUL or HOLY SPIRIT PARISHIONER
NON-PARISHIONER

Table with columns: M/F, LEAGUE, START/FINISH, GRADES, COST (ST. RITA PARISHIONER / SCHOOL), COST (NON-PARISHIONER). Includes rows for 3rd-4th and 5th-6th grades, and a summary row for maximum charges.

We do require every team to have a volunteer parent serve as Team Manager. Parent volunteers are needed to help setup for home games, as well as help with the concessions.

LEAGUE DESCRIPTIONS

3rd - 4th Grade League – This league is for children who have played some type of organized soccer. They should have basic skills and be willing to learn positions and plays. This league tends to be a little competitive for the children, and teams travel to other parishes for games. There will be a minimum of 1 practice per week and games will be on the weekends.

5th - 6th Grade League – Generally the teams will practice twice per week and play most games on the weekend. Schedules are not determined until teams are picked and coaches are assigned.

ST. RITA CYO SOCCER REGISTRATION FORM



INSTRUCTIONS

1. Please complete a form for each player. Extra forms are available at the parish office or at www.saintrita.org.
2. Make checks payable to "St. Rita CYO." Please see chart on reverse side for cost and maximum charge per family.
3. Please bring completed forms with payment on registration day.

<u>FEE CALCULATION</u>	
TOTAL DUE THIS REGISTRATION	\$ _____
TOTAL DUE SIBLING REGISTRATION	\$ _____
TOTAL DUE SIBLING REGISTRATION	\$ _____
FAMILY SUB-TOTAL	\$
If you have any questions or concerns, please feel free to call Nancy Meisenzahl @ 671-3014 or e-mail obriennancys@aol.com	
--- ST RITA CYO USE ONLY ---	
DATE PROCESSED: _____	INITIALS: _____

PLEASE PRINT:

PLAYER'S NAME: _____ MALE FEMALE
 STREET: _____ TOWN: _____ ZIP: _____
 PHONE: _____ SCHOOL: _____ PARISH: _____
 GRADE (as of 9/1/07): _____ BIRTHDATE: ____/____/____ LEAGUE: _____

MOTHER'S NAME: _____ FATHER'S NAME: _____
 PHONE: _____ PHONE: _____
 E-MAIL: _____ E-MAIL: _____

IN CASE OF EMERGENCY, PLEASE NOTIFY:

NAME: _____ RELATIONSHIP TO CHILD: _____
 ADDRESS: _____ PHONE(S): _____

I request that my child named above, participates in basketball. My child has adequate insurance coverage, and in case of injury, I will assume all responsibility. My child is responsible for returning, in good condition, all uniforms and/or equipment issued to him/her. The information above is correct to the best of my knowledge. I hereby release and save harmless St. Rita Church/School from any and all liability for any and all injuries resulting from this activity. Parent or guardian acknowledges that St. Rita Church/School affords no medical/dental coverage for participants in this activity.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

CYO MEDIA RELEASE: I hereby give Catholic Family Center / CYO permission to use photographs, slides, audio tapes, or videotapes of _____ (name of participant).

- Please check one of the following boxes in conjunction with the photographs, slides, audiotape, or videotape:
- I give my permission for Catholic Family Center to identify the person(s) either verbally or in writing.
 - I request no identifiable information pertaining to the above-named person(s) be used.

It is my understanding that this material will be used for Catholic Family Center/CYO public relations purposes.
 I hereby release Catholic Family Center/CYO agents, servants, and employees from any damages resulting from the use of this material.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

VOLUNTEER TO BE A HEAD COACH / ASSISTANT COACH / TEAM MANAGER

NAME: _____ HEAD COACH ASSISTANT COACH
 E-MAIL: _____ TEAM MANAGER CYO BOARD
 COACHING PARTNER: _____ CELL PHONE: _____

ALL PROSPECTIVE COACHES MUST COMPLETE "CREATING A SAFE ENVIRONMENT" TRAINING AND ATTEND CYO MEETINGS AS WELL AS SIGN THE CODE OF CONDUCT AGREEMENT.