

School Year _____
_____ to _____

CORPUS CHRISTI ATHLETIC ASSOCIATION

Sports Registration Form (Kindergarten and First Grade)

Grade: _____

Sex: _____

Sport: Soccer _____ Basketball _____ Fees: Registration: \$25.00 Check #: _____

Make checks payable to *Corpus Christi Booster Club*. List Child's name on front of check to receive proper credit. **NO CASH PLEASE. DEADLINE FOR REGISTRATION IS FEBRUARY 1ST**

Player Information: Child's Name: _____

Parent(s) Name: _____

Home Address: _____

Phone: Home: _____ Work: _____

Jersey Size: Youth Small (6-8): _____

Youth Medium (10-12): _____

Youth Large (14-16): _____

We need volunteers to coach. If you are willing to donate your time and talents, please fill in this section. I need 2-3 coaches for each team, coaches and assistants will be based on a first come first serve of registration forms returned to me. **All coaches must complete the Child Protection Program.** I am willing to Coach or be an assistant:

Coaches' shirt size: S__ M__ L__ XL__ XXL__

PARENTAL CONSENT AND INSURANCE INFORMATION MUST BE COMPLETED BEFORE CHILD MAY PRACTICE OR PLAY.

Name of Player: _____ School Year _____ to _____

I, _____, the guardian of the above named candidate for a position on a Corpus Christi School Team, hereby give my approval for his/her participation in any and all Parochial League activities during the school year referenced above. I assume all risks and hazards incidental to such participation including transportation to and from activities, and I do hereby release and absolve indemnity and agree to hold harmless the Corpus Christi School, Athletic Association, and the CYO Parochial League, the organizers, sponsors, supervisors, coaches, participants, and persons transporting my child to and from activities, for any claims arising out of any injury to my child except to the extent and in the amount covered by accident or liability insurance which I have taken out as noted below. I agree to return, upon request, the uniform and other equipment issued to my child in as good condition as when received except for normal wear and tear. I will furnish a certified birth certificate of the above named candidate if requested by the school or league officials. I will also furnish school data, and will encourage my child to maintain his/her academic grades at the highest possible standard.

I have my own insurance: ___ Yes ___ No Name of Insurance Company: _____

My child is physically able to play sports: _____ Yes _____ No

Signature of Parent: _____ Date: _____