

# Sabattus Recreation Club 2009 Soccer Registration Form

Sabattus Recreation Club has welcomed on it's new Director, Jen Waterman, and Asst. Director, Tracy LaBerge, for Soccer this year. With this, brings changes to the program that will help it grow, and opportunities to expand our playing experiences with other teams and towns, as well as coaches and officials training. These changes are going on as we speak, so for the latest information, be sure to log on to [www.sabattusrec.com](http://www.sabattusrec.com) and click on "soccer" to get the news!

To reach Jen Waterman, Director, email [soccer@sabattusrec.com](mailto:soccer@sabattusrec.com), or call 375-4882. To reach Tracy LaBerge, Assistant Director, email [soccer1@sabattusrec.com](mailto:soccer1@sabattusrec.com) or call 375-6534.

REGISTRATION NIGHT IS *JUNE 15<sup>TH</sup> 5-7PM* AT SABATTUS CENTRAL SCHOOL. ALL FORMS *MUST BE IN BY AUGUST 15<sup>TH</sup>, 2009*, OR THERE MAY NOT BE A SPOT FOR YOUR CHILD ON A TEAM!!!

Cleats and shin guards are required for all grades. Mouthguards are *strongly recommended* beginning with 2<sup>nd</sup> graders, for safety purposes. The structuring of grade-levels on teams is being changed; there will no longer be any pre-K; kids entering kindergarten is where the program now begins!! More information will be available as it is officially determined. Registration fee is \$30.; checks can be made and mailed to the following:

SABATTUS REC CLUB, ATTN: SOCCER, P.O. Box 690, Sabattus, ME 04280

We will be participating in the **Butter-Braid fundraiser** again this year; those wishing to **opt-out** need to pay \$25.; all others will be required to sell **at least 4 items**. *This money not only supports soccer, but all other sports offered by Sabattus Rec!* Thanks to you all for your support, and looking forward to a great 2009 season!!

Players Name: \_\_\_\_\_

Grade as of Fall 2009: \_\_\_\_\_

Parent(s) Name(s): \_\_\_\_\_

Street Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

(Email Addresses will not be distributed, but used for communication purposes only)

Did player participate last year? YES \_\_\_\_\_ NO \_\_\_\_\_

Last year's Team and/or Coach: \_\_\_\_\_

Player Shirt Size YS \_\_\_\_\_ YM \_\_\_\_\_ YL \_\_\_\_\_ AS \_\_\_\_\_ AM \_\_\_\_\_ AL \_\_\_\_\_ AXL \_\_\_\_\_

I am willing to: Coach \_\_\_\_\_ Assist \_\_\_\_\_ Other \_\_\_\_\_ NYSCA Certified Y \_\_\_\_\_ N \_\_\_\_\_

I, \_\_\_\_\_, give permission for my child, \_\_\_\_\_, 'to participate in the Sabattus Recreation Club Soccer Program. I understand the risk involved in any sport, and agree to assume these risks. I release the Sabattus Recreation Club, League, Coaches, Assistants, Referees, Volunteers and Directors from any liability during all practices and games. I am aware that Sabattus Rec Club requires that each child have medical insurance to participate in this program. I understand that a Parent/Guardian of each child must be present at all times during practices and games. Should my child be injured, I give permission for appropriate first aid to be given to my child.

Signature \_\_\_\_\_ Date \_\_\_\_\_