

St. Martin of Tours Sports Registration Form

SOCCKER AND VOLLEYBALL

Registration #

Childs Name: _____

Sex M or F

Birthday ___/___/___

Grade going into: _____

Signed up for the same sport elsewhere Y or N

Address: _____

Zip: _____

Phone #: _____

Parish registered in

SMT _____ Other? _____

Parish living in

SMT _____ Other? _____

School Attending: _____

Uniform Size (Circle One)

Shirt Size: YM YL AS AM AL XL XXL

Pant Size: YM YL AS AM AL XL XXL

I would like to manage, _____ or coach, _____ grade _____

**All coaches must complete a Child Abuse form at the time of registration. SMT will decide if the form is necessary to submit for each volunteer.

NOTES

PARENTS INFORMATION BELOW

EMAIL: _____

CELL #: _____

Registration Fees: (Make checks payable to St. Martin Athletic Association)

\$75 for first child per sport (High school is considered seperately)

\$40 for each additional child (1st grade and up only)

\$40 For Pee-Wee: (Pre-K & Kindergarten)

Total Registration fees _____

paid by check _____ or cash _____

IF THE NAME ON THE CHECK IS DIFFERENT THAN THE CHILD YOU ARE PAYING FOR, PLEASE FILL OUT BELOW.

NAME ON CHECK: _____

CHILDS NAME: _____

CONCESSION STAND DEPOSIT: A \$100 concession deposit is required per child and will be returned after you have worked your assigned shift. A shift is usually 3 to 4 hours. You may elect to buy out of your shift for \$100.00, but you must elect to do so now or at least 2 weeks before your assigned shift.

of Deposits _____ X \$100 _____ Check _____

UNIFORM DEPOSIT: A \$50.00 uniform deposit is required per child and will be returned when uniform is returned in satisfactory condition.

#of uniforms _____ x\$50 _____ Check _____

**A donation of time as mentioned in the deposit check section is required to participate on SMT teams. Uniforms must be returned by the last uniform turn in date or deposited checks will be cashed. Children with outstanding uniforms will forfeit their ability to play sports at SMT. It is the policy of SMT Athletic Association to call 911 in case of injury or medical emergency. I release SMT Athletic Association, managers, coaches, and parents of any or all liabilities while participating in the sports programs sponsored by SMT Athletic Association

Signed _____