

# New Knoxville Soccer Club/WCOSA Fall 2017 Registration Form

## Division and Entry Fees

U6:	PreK/K	\$35	Co-Ed
U8:	1st/2nd	\$45	Co-Ed
U10:	3rd/4th	\$55	
U12:	5th/6th	\$55	
U14:	7th/8th	\$55	
U19:		\$50	

**Registration Deadline:**  
 July 1, 2017  
**Late registrations:**  
 Will be accepted on an as needed basis with **\$10 late fee** until July 25th.  
**Make Checks Payable to: NKYSA**  
 If mailing, send to: NKYSA Soccer  
 PO Box 63, New Knoxville, OH 45871

**Please Note U10-U14:** Co-ed teams may be formed if there are not enough girls or boys to form separate teams.

**\* ALL FEES ARE NON-REFUNDABLE\***

SHIRT SIZE	(Please Circle One)	SHORT SIZE	(Please circle one)
<u>Youth</u>	<u>Adult</u>	<u>Youth</u>	<u>Adult</u>
YS (6-8)	AS	YXS (4-5)	AS
YM (10-12)	AM	YS (6-8)	AM
YL (14-16)	AL	YM (10-12)	AL
	AXL	YL (14-16)	AXL

Player Name: \_\_\_\_\_ Male/Female (Circle One)

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

Date of Birth: \_\_\_\_\_ School Attending: \_\_\_\_\_ Grade in Fall: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

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

Home Phone: Father \_\_\_\_\_ Mother \_\_\_\_\_

Cell Phone: Father \_\_\_\_\_ Mother \_\_\_\_\_

Email: Father \_\_\_\_\_ Mother \_\_\_\_\_

Preferred method of contact: \_\_\_ Text \_\_\_ Email \_\_\_ Home Phone

**PARENTS – Please mark one if interested:**     Coach \_\_\_\_\_     Assistant Coach \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE-SOCCER ORGANIZATION USE ONLY

Division \_\_\_\_\_ Boys/Girls    Medical Form \_\_\_\_\_ Fee Paid \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check# \_\_\_\_\_

Rec'd By \_\_\_\_\_ Date \_\_\_\_\_