

## JLS SOCCER - Fall 2010 Registration Form

Walk-In Registration: July 21st (6pm-8pm) and July 24th (10am-12pm)  
OR  
Springfield Township Building - 9211 S. Susquehanna Trail, Seven Valleys  
Mail Registration To: JLS Soccer, 13 Old Mill Drive, Jacobus, PA 17407

*Registrations received AFTER July 31st will only be accepted IF space is available and must pay \$10 late fee.*

Player's Name: _____			
Home Address: _____			
Telephone: _____	Parent's Email: _____		
Date of Birth: _____	Age on 7/31/10: _____	Male: <input type="checkbox"/>	Female: <input type="checkbox"/>
Mother's Name: _____	Work Phone: _____	Cell Phone: _____	
Father's Name: _____	Work Phone: _____	Cell Phone: _____	
School Attending (2010 - 2011): _____		Grade (2010 - 2011): _____	

Name and phone number of person to contact in case of emergency: \_\_\_\_\_

Please list any medical conditions: \_\_\_\_\_

If you played JLS soccer before, please indicate - Coach: \_\_\_\_\_ Team Name: \_\_\_\_\_

**Registration Fee (payable to JLS Soccer): \$25 - Please include additional \$30 (\$55 total) if uniform is needed and indicate size below:**

Uniform Sizing- If not sure, go to the next size larger (please note that jerseys do run small)

**Jersey Size:** Youth - S M L Adult - S M L XL

**Short Size:** Youth - S M L Adult - S M L XL

**VOLUNTEERS:** Please indicate any activities that you are interested in helping with.

Head Coach       Assistant Coach       Fields       Other: \_\_\_\_\_

Signature of Registering Parent: \_\_\_\_\_

**Questions? Interested In Volunteering Your Services?**

Contact Matt Manning @ 717-347-7067 or [jls.soccer@comcast.net](mailto:jls.soccer@comcast.net)

Check Us Out On The Web at: [www.jlsrec.com](http://www.jlsrec.com)

<b>Office Use Only</b>	Paid: <input type="checkbox"/> Check _____	<input type="checkbox"/> Cash _____
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