



Soccer Registration

Player Participation Fee = \$45 per student (This fee includes a new t-shirt that will have a new logo)

Participation Fee Max = \$35 for one student
\$90 for two students
\$10 for each additional student
(example for 3 students : \$90 plus \$10=\$100)

Make checks payable to: Holy Family Athletics

Due Date: Check, form and waiver are due no later than:

Participant's (1) Name: _____
 Boy Girl Grade in Fall ____ Age (August 1, '16) _____

Check Shirt Size: Youth Small (6-8) Medium (10-12) Large (14-16)
Adult Small (34-36) Medium (38-40) Large (42-44)

Participant's (2) Name: _____
 Boy Girl Grade in Fall ____ Age (August 1, '16) _____

Check Shirt Size: Youth Small (6-8) Medium (10-12) Large (14-16)
Adult Small (34-36) Medium (38-40) Large (42-44)

Participant's (3) Name: _____
 Boy Girl Grade in Fall ____ Age (August 1, '16) _____

Check Shirt Size: Youth Small (6-8) Medium (10-12) Large (14-16)
Adult Small (34-36) Medium (38-40) Large (42-44)

****Additional shirts may be purchased for \$10 a shirt. Please designate size and quantity below:**

Liability Waiver

As a participant (or as a parent or guardian of a participant under 18 years of age) in the Peoria Parochial Soccer Association (PPSA) soccer program, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, including death, damages or loss which may be sustained as a result of participation in any and all activities connected with or associated with such soccer program. I (as a parent or guardian of a participant under 18 years of age) agree to waive and relinquish all claims I may have as a result of participation in the program against the Park District, School District 150, and the respective schools and churches which form the PPSA, and its officers, agents, servants and employees. I do hereby fully release and discharge the Park District, School District 150, and the respective schools, and churches which form PPSA and its officers, agents, servants and employees from any and all claims from injuries, including death, damage or loss which the participant may have or which may accrue to the participant on account of participation in the Peoria Parochial Soccer Association.

I further agree (as a parent or guardian of a participant under 18 years of age) to indemnify and hold harmless and defend the Park District, School District 150, and the respective schools and churches which form PPSA and its officers, agents, servants and employees from any and all claims resulting from injuries, including death, damages, and losses sustained and arising out of, connected with, or in any way associated with the activities of the Peoria Parochial Soccer Association.

I have read and fully understand the above Soccer Program details and Waiver and Release of all Claims.

Parent or Guardian Signature

Date

Home Phone: _____ Cell: _____

Email: _____

Preferred method of Contact: Text, Cell Phone, Home Phone, Facebook

Coaches – Is the parent/guardian interested in coaching a team? Yes _____ No _____.

If yes, **Note: All coaches, assistant coaches and volunteers of any kind from parishes in the Diocese of Peoria must be fingerprinted, compete a DCFS background check (CANTS), and attend the Safe Environment Training (formerly known as Protecting God’s Children program) prior to any involvement in the program. See Athletic Director for more information.**

Code of Ethics and Sportsmanship

It shall be the goal of the Peoria Parochial Soccer Association to teach, foster and promote the sport of soccer. It is the intent of this program to provide participants with an opportunity to enjoy the sport while working to learn and improve their playing skills in addition to promoting good sportsmanship and a Christian Attitude. **Winning must never come at the expense of these fundamental objectives. As a parent/guardian, I will strive to instill and promote in my children, the meaning of Good Sportsmanship and a Christian Attitude.**

Parent or Guardian Signature

Date