



**SKOR
SOAR**

2017 SOCCER REGISTRATION FORM

Program dates: September 10 – October 29

Time: 11:00 a.m. – 12:00 p.m.

Location: Sawmill Branch – 185 Sawmill Road, Hamilton, NJ 08620

League fee: \$30 per participant from July 11 – August 18

Late fee: \$10 beginning August 19 (Uniform shirts are not guaranteed for late registrants)

The YMCA SKOR-SOAR soccer program is open to individuals with disabilities ages 3+. With help from the Hamilton Girls Soccer Club, there are weekly practices every Sunday that will provide different levels of instruction for everyone. Athletes are grouped by age and ability level to the best of our ability and will learn different skills from the very basics, to more in depth instruction, as well as participating in non-competitive scrimmages.

Athletes should wear athletic type clothing as well as proper athletic type shoes. Sneakers and plastic molded cleats are acceptable. No metal spikes will be allowed. Athletes should bring their own water in a plastic water bottle labeled with their name. *In order to run this program effectively, ie recruiting coaches, volunteers, sponsors, and ordering uniforms, registering in a timely fashion is extremely important.*

All participants must have a current Hamilton Area YMCA Membership throughout the season.

☐ Check if information has changed. Please print neatly.

Participant Name: _____ Date of Birth: _____ Sex: M ☐ F ☐

Address: _____ City: _____

State: _____ Zip: _____ Home Phone: _____ Cell Phone: _____

Parent E-mail Address: _____

E-mail is used for team purposes only

Age of player at start of league: _____ Does player need a 1-on-1 Buddy: Yes ☐ No ☐

Player uses: Walker ☐ Wheelchair ☐ None ☐ Other ☐ (Please specify): _____

T-Shirt Size (Please be certain of size choices. We will not have the ability to order replacements):

Youth S ☐ Youth M ☐ Youth L ☐

Adult S ☐ Adult M ☐ Adult L ☐ Adult XL ☐ Adult 2XL ☐

Please select your age group:

Ages 5 – 8 ☐

Ages 9 – 15 ☐

Ages 16 – 21 ☐

Ages 22+ ☐

7SKLG 1SOC5-8

7SKLG 1SOC9-15

7SKLG 1SOC16-21

7SKLG 1SOC22+

Signature of Parent/Guardian (If applicable)

Date