**CHARLESTOWN**

**RECREATION**

**SUMMER SOCCER**

**ALL AGE BRACKETS ARE DESIGNED AROUND WHAT GRADE YOUR ATHLETE WILL BE ENTERING IN THE UPCOMING FALL SEASON. K/1 2/3 4/5 6/7/8**

**FEE: $25.00 PER CHILD**

**SIGN-UP FORMS & PAYMENT ARE REQUIRED PRIOR TO PARTICIPATION:** Forms can be dropped off at the Charlestown Town Clerks office, Recreation office, or in person by appointment. **LATE REGISTRATIONS WILL BE CONSIDERED but we would appreciate prompt notification.** Your athlete will then be placed on a team following the evaluation and draft.

**REGISTRATION DEADLINE: (FIRM) June 3, 4:00 P.M.**

**(FOR QUESTIONS CALL/TEXT (603-477-9455 OR EMAIL** [**coachjwest22@gmail.com**](mailto:coachjwest22@gmail.com)**)**

**DIVISION: K1 2/3 4/5 6/7/8**

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_D.O.B.\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_Grade\_\_\_\_\_\_\_\_**

**SHIRT SIZE- YOUTH: S M L XL ADULT: S M L XL**

**ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GUARDIAN NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I WOULD LIKE TO**

**COACH/OFFICIATE: ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SHIRT SIZE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GOOD SPORTSMANSHIP WILL BE SHOWN BY ALL PLAYERS, PARENTS, SPECTATORS AND OFFICIALS. BY SIGNING THIS DOCUMENT I AGREE TO UPHOLD, ENCOURAGE, AND ENFORCE GOOD SPORTSMANSHIP**