

Participant's Name \_\_\_\_\_ **IMPORTANT** (Must play age appropriate with Jan 1 guidelines)  
Player Date of Birth(mm/yy) \_\_\_\_\_ Grade: \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address/City/Zip \_\_\_\_\_

Telephone (Primary) \_\_\_\_\_ (Alternate) \_\_\_\_\_ Email address \_\_\_\_\_

**Parent/Guardian read & sign!**

As a parent/guardian of the player indicated above, I have read & understand the League registration procedures described on this website. As the parent/guardian, I accept the responsibility behalf of the participant and that the registrant indicated above will play according to the policies listed in the registration procedures and League Rules including but not limited to the January 1guidelined and age appropriate birthdate policy. Any participation to the contrary will be subject to removal from further participation the participant without refund. I agree to allow Break Away Sports Center to contact me about soccer programs offered during the upcoming season.

X   
Adult Parent/Guardian Signature

**NEXT STEP** (check each box that applies)

**Winter I**

- STEP 1** - Mon 4:30  
Getting/Keeping/Moving the ball
- STEP 2** - Tue 4:30  
Attacking and Scoring

**Winter II**

- STEP 2** - Mon 4:30  
Attacking and Scoring
- STEP 3** - Tue 4:30  
On Both Sides of the Ball

**Winter III**

- STEP 1 & 2** - Mon 4:30  
Getting/Keeping/Moving the ball  
& Attacking/Scoring
- STEP 4** - Tue 4:30  
Playing with Teammates
- STEP 5** - Tue 4:30  
Goalies

**TRYOUT CAMP or WORKSHOP:** (check each box that applies)

- CAMP** (May 6, 10, 12 & 13)
- WORKSHOP ONLY** (May 13)

**CREDIT CARD PAYMENT**

(Office Use ID \_\_\_\_\_ )

As the Representative registering the participant above, I understand that by completing and signing or authorizing the credit card information below, I authorize the payment of all fees associated with the above individual registration in order to get placed on a team whenever possible. I accept and approve that such fees will automatically be charged to this credit card without any further notification.

- MasterCard
- Visa
- Discover
- AmerEx

Card Holder Signature X \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_