Fredon Township Recreation League
Soccer Registration - Spring 2013

"NOT A SCHOOL SPONSORED EVENT"

Child's Name	Current Grade
Mailing Address	
City, State, Zip	
Age Birth Date Male/Female	Phone #
Email Address:	
Previous Coach	
PHYSICIAN'S NAME PHYSICIA	N'S PHONE #
Allergies or Medical Problems:	
Phone Number (Daytime)(Evening)	
EMERGENCY:CONTACT NAME	PHONE
AUTHORIZATION: I hereby authorize the Fredon Recreation League and its authorized coard for my child in the event of an emergency, and hereby authorize any lice necessary medical treatment to my child. I UNDERSTAND that the registration fee is paid to partially cover necess property. Any cost incurred by the League via action or inaction by the of and collection pursued to the full extent of the law. I UNDERSTAND that the League purchases "secondary type" medical an "primary medical" plan coverage for my child. I UNDERSTAND that as a spectator I have an obligation to act responsible I HEREBY GIVE MY PERMISSION FOR MY CHILD	ensed physician/and or medical personnel to render all ary costs. No child is entitled to keep or destroy any league child and/or appropriate guardian/parent can be billed in full d liability insurance; personal family medical plan represent ility, and exhibit good sportsmanship at all times. (name) to
participate in Recreation Soccer sponsored by the Fredon	-
Parent/Guardian Signature	Date ********************************
	ily member & \$30.00 per uniform (if necessary) ion forms received after March 22nd, 2013
MAIL TO: Fredon Recreation - Soccer 2 Schindler Court Fredon, NJ 07860	<i>Questions?</i> Charlie: (973) 383-2708

Volunteers (Please select one of the following): Coaching Asst. Coach Uniforms Field Pre	pOther
(Shirt) Youth: Small Medium Large Adult: Sma	ll Medium Large X-Large 2XL
(Shorts) Youth: Small Medium Large Adult: Sma	ll Medium Large X-Large 2XL

Visit <u>www.fredonrecreation.com</u> for more information.