





Town of Cortlandt 2018 Spring Girls Youth Soccer

BEFORE FEBRUARY 9th Fee: \$50 with ID Card \$55 without ID Card \$65 Non Resident
 AFTER FEBRUARY 9th Fee: \$60 with ID Card \$65 without ID Card \$77 Non Resident
 Mail with check or money order to: Town of Cortlandt Recreation,
 1 Heady Street, Cortlandt Manor, NY 10567



**EVALUATIONS WILL TAKE PLACE AT BLUE MOUNTAIN MIDDLE SCHOOL
 ONLY FOR PLAYERS THAT DID NOT PARTICIPATE IN THE FALL 2017 LEAGUE
 AS FOLLOWS:**



Pee Wee Girls (1st & 2nd Grade) Midget Girls (3rd & 4th Grade) Junior Girls (5th & 6th Grade)	Tuesday, February 27th at 6:00 PM Tuesday, February 27th at 6:30 PM Tuesday, February 27th at 7:00 PM
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Childs Name _____ Male _____ Female _____

Street Address _____ Town _____ Zip _____

Home # _____ Work or Cell # _____ Email _____

School _____ Grade _____ D.O.B. ____/____/____

Emergency Contact Name _____ Emergency # _____

Parent Name _____

Has your child ever played soccer before? **Yes/ No**

If you played for the Town in the Fall, what team? _____

Shirt Sizes (Please select one): Youth: **Large** (14-16) Adult: **Small** (34-36) **Medium** (38-40) **Large** (42-44) **X-Large** (46-48)

ALL PLAYERS MUST PROVIDE THEIR OWN SHORTS AND HARD SHELL SHINGUARDS

Does your child have any conflict, which could prevent him/ her from attending games on Sunday afternoons or practices on weeknights and Saturdays? (Circle One) Yes / No

If yes, what? _____

Pertinent medical information (Allergies, medications, etc.) _____

The Town of Cortlandt DOES NOT PROVIDE ACCIDENT INSURANCE. I understand that my child agrees to play on any team assigned, obey all rules and to attend practice showing fair play and sportsmanship at all times.

Parents Signature _____ Date _____

Coaches and Sponsors Needed

If any members of your family is interested in coaching, check below:

I am interested in coaching: Name _____ Contact # _____

I am interested in assisting: Name _____ Contact # _____

I am interested in sponsoring a team: \$125.00 Name _____ Contact # _____

For Office Use Only:				
Amount Paid \$ _____	ID Card # _____	Expir. Date _____	Date Deposited _____	Reg # _____

Youth Soccer Deadline: February 9th