



Office Use Only:

YOUTH SOCCER INFORMATION FORM

Please fill out one form per child and PLEASE PRINT CLEARLY.

*****REQUESTS CANNOT BE GUARANTEED.**

Child's Name: _____ Age: _____

Parent / Guardian Name: _____ Child's Gender: _____

Address: _____ City: _____ Zip: _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

Date of Birth: ____/____/____ Name of School: _____

Email Address: _____

Age Division: (CHOOSE THE AGE LEVEL YOUR CHILD WILL PLAY IN THE UPCOMING SOCCER SEASON.)

4-5

6-7

8-9

10-13

Shirt Size: (SIZES ARE AVAILABLE AT THE PARK OFFICE TO TRY ON.)

(6-8) Youth Small

(10-12) Youth Medium

(14-16) Youth Large

Adult Small

Adult Medium

Adult Large

Playing experience based on years:

1 year or less

1-3 years

4 and up

Coach or Player Request.
We do our best to approve each request, but due to team size and other factors, some may be denied.

Are you willing to coach? **If so, please check below and fill out the coaching form.**

Yes _____ ((Head _____ Asst. _____))

No _____

I'd like to coach with: _____

Coaching applications must be submitted prior to the registration deadline to be considered.

MUNSTER PARKS AND RECREATION WAIVER OF RELEASE
The undersigned participant, on behalf of himself/herself, a spouse, or as a parent for any minor child, HEREBY AGREES TO RELEASE AND INDEMNIFY the Town of Munster, Indiana, the Munster Parks and Recreation Department and Board, its council, board members, employees, agents and independent contractors from any and all injuries and/or damages sustained by the undersigned participant, his/her spouse and/or minor child in connection with the activity described above, including any transportation to or from said activity.

FOR ALL PLAYERS: I understand that I may request ONE player or coach, but I also know any request is not definite. I understand once I get contacted by my child's coach, I will not be able to switch teams due to carpooling reasons, practice times and/or for location convenience. I understand that if I'm unhappy with any of the reasons above, the only way to withdraw my child from the season is to fill out refund paperwork and I will get my fee back (minus a \$10 administrative fee).
10-13 year olds teams will be formed at random.

Parent's Signature: _____ Date: _____

Please drop off, fax (219) 836-6541, or mail this application to Munster Parks, Attn: Skyler Ramberger, 1005 Ridge Road, Munster, IN, 46321.