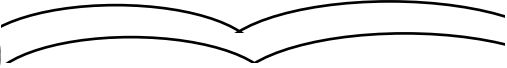




Greenville

Area Soccer Association



Catch the Fever!

Grades K - 7

(Must have been over 5 years old by September 1, 2009)

(Must be enrolled in Kindergarten for 2009)

PLAYER'S NAME _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

GRADE _____ AGE AS OF 9/1/09 _____ BIRTHDATE _____

MALE _____ FEMALE _____

EMAIL: _____ Your email address will only be used for soccer updates.

WHAT SCHOOL DISTRICT DO YOU ATTEND? _____

TOWNSHIP/BOROUGH:	GALSA USER'S FEE:	ADDITIONAL SIBLING (S)	SHIRT SIZE:
_____ GREENVILLE BORO	- \$30.00	\$15.00	_____ YOUTH SMALL (6-8)
_____ HEMPFIELD	- \$50.00	\$25.00	_____ YOUTH MEDIUM (10-12)
_____ SUGAR GROVE	- \$50.00	\$25.00	_____ YOUTH LARGE (14-16)
_____ JAMESTOWN	- \$50.00	\$25.00	_____ ADULT MEDIUM
_____ REYNOLDS	- \$50.00	\$25.00	_____ ADULT LARGE
_____ COMMODORE PERRY	- \$50.00	\$25.00	_____ ADULT X LARGE
_____ OUTSIDE GALSA SVC AREA	- \$50.00	\$25.00	_____ ADULT XXL

NO SPECIAL REQUESTS WILL BE HONORED!

Please list the names of brothers or sisters registering for soccer.

NAME _____ GRADE _____

NAME _____ GRADE _____

NAME _____ GRADE _____

PARENTS We need your help to coach. If you are willing to help, please list your name below.

NAME _____ PHONE _____ SHIRT SIZE _____

WAIVER OF LIABILITY

CHILD'S NAME _____

I, the undersigned, being parent or legal guardian, do hereby consent to my son/daughter playing in the Greenville Area Soccer Association league and am fully aware of the risks involved by playing the sport of soccer. Being fully aware of these risks, I am willing to personally assume these risks and hold harmless the Greenville Area Soccer Association, Greenville Area Leisure Services Association, Greenville Area School District, Borough of Greenville, and all officers, other players, managers, directors, coaches and employees of each for any and all injuries which may be sustained as a result of participation in this league.

Signature of Parent or Legal Guardian

Relationship to Player

Date

_____ # OF CHILDREN REGISTERED
(Registration Deadline August 30)

APPLICATION TAKEN BY _____

_____ TOTAL RECEIVED

DATE REGISTERED _____
CASH _____ CHECK # _____