

Jay Community Center

(Boys & Girls Ages 3 thru 14)



WHAT:

Boomer Fall Soccer Outdoor Program for Boys & Girls Ages 3 (as of 9/1/19) thru 14 (8th grade)

WHEN:

after-Games will be played on Saturday late mornings/early noons and make ups Sunday afternoons From September 7, 14, 21, 28 and October 5, 12

WHERE:

Games will be played at the Jay County Recreation Complex located on Como Road & 450 S.

Cost: \$50.00 On or Before Sunday, August 14, 2019

Cost includes: Boomer Soccer shirt and practice ball Non-Refundable Fee • SHIN GUARDS ARE MANDATORY

You must specify before the draft if you would like your child to play up or have a special request! It must be marked below. No exceptions to this

Fundraisers/Scholarship Program:

Contact JCC for information on the current fundraiser. Sell enough items and play for free! Financial assistance is available upon request

Picture Day: TBA

Player Selection: Teams will be formed by JCC according to special requests and random selection.

> Typical Age Groups: 3-4, 5-6, 7-9, 10+ *Age groups may vary depending on numbers*

Text Updates:

Please Provide a Cell Phone and a Email to Receive Text Alerts

2019 Boomer Fall Soccer Registration Form Name: Address: Shirt Size: YS (6-8) YM (10-12) YL (14-16) AS AM AL Parent/Guardian: _____ Phone: ___ Other Emergency Contact: ____ PARTICIPANT RELEASE: I hereby grant permission for my child to participate in the Jay Community Center Boomer Fall Soccer Program. Further, I agree to hold harmless & release the center, directors, officials, & coaches from any & all liability related to this program. JCC reserves the right to use photographs for any promotional material. Parent/Guardian Signature: WE NEED COACHES and REFS, would you, a family member, or a friend like to help out? If Yes, what is the name (and best way to contact) of Prospective Coach (Name): Home Phone: ____Email: _____Email: _____ Shirt size for coach (please circle one): AS AM AL AXL AXXL AXXXL AXXXXL Special Requests _____ Office Use Only: Fee Paid (Y/N) _____ Amount Paid ____ Date ____ Charge, Check, or Cash ____ Employee ____ Receipt # _____ Registration \$ _____ Fundraiser \$ ____ Credit \$ ____ Balance Owed \$ _____

115 E Water St, Portland, IN 47371 | p: (260) 726-6477 | f: (260) 726-6409 | info@jaycc.org

(Please cut along this line and return the lower portion to the Jay Community Center)