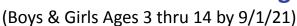


Jay Community Center

2021 Boomer Fall Soccer Program





Please follow our Facebook page, Remind App, Exposure Link and check your emails for updates

WHEN:

Games will be played on Saturday mornings and early afternoons (9/11, 9/18, 9/25, 10/2, 10/19, & 10/16)

WHERE:

Games will be played at the Jay County Recreation Complex 5363 W 450 S Portland, IN 47371

COST: Non-Refundable Fee

\$55.00 On or Before Monday, August 16, 2021
Cost includes: Boomer Soccer Shirt & Practice Ball
*Team Coaching Credit up to \$55

PICTURES:

Pictures will be taken within the first three weeks of games prior to the scheduled game time. Pictures will be taken by

Legacy Portraits by Carly Sanderson

TEAMS:

Teams will be organized by JCC. Players will be placed on teams by special requests, M/F, & age. Typical age groups are the following: 3-4, 5-6, 7-9, 10-14.

FUNDRAISER:

Ask JCC how I can reduce registration fees

POTENTIAL SPECIAL REQUESTS:

Same Team as Sibling: _	
Please Play With:	
(If you want your child on the same team :	as a friend the request must match the friend's request)

Siblings playing in the same age division will be placed on the same team. All other requests are not guaranteed, and teams won't be stacked or overloaded due to special requests.

COACHES:

Would you, a family member, or a friend like to coach or referee? If yes please provide the information below
Name:
Email:
Cell Phone:
Birth Date:
Shirt Size: AS AM AL XL XXL XXXL XXX
* All coaches will have a background check complete

* All coaches will have a background check complete at a minimum of every two years.

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

2021 Boomer Fall Soccer Registration Form					
Name:	_ M/F DOB	Age (As of 9/1/21)	Grade		
Address:	City:	Zip:			
		4-16) AS AM			
Parent/Guardian:	Phone:	Email:			
Other Emergency Contact:	Phone:				
PARTICIPANT RELEASE: I hereby grant permissi Program. Further, I agree to hold harmless & releathis program. JCC reserves the right to use photo	ase the center, director	s, officials, & coaches fr			
Parent/Guardian Signature:		Date:			
Office Use Only:					
Fee Paid (Y/N) Amount Paid Date	Charge, Check, or	Cash Employee	e Receipt #		
Registration \$ Fundraiser \$	Credit \$	Balanc	ee Owed \$		