



Hammonton Youth Soccer Association 2008 HYSA Recreational Program Registration

PO Box 1050
Hammonton, NJ 08037

Visit us on the Web at
<http://www.hysaonline.org>

HYSA Use Only

Division: _____

Ranking: _____

Notes: _____

Please return this completed form with payment by June 30, 2008.

Please fill in all information below. A separate registration form should be filled out for each player. A copy of each player's birth certificate must be attached to each form. Registration forms, birth certificate copies and payment by check for all siblings can be mailed to the address above, or forwarded to any HYSA Board member.

Player's First Name: _____ Middle: _____ Last: _____

Street Address: _____ City: _____

Player Gender: Male Female Date of Birth: _____

Home Phone: _____ Other Phone: _____

Which grade will the player be entering in September 2008? _____ What year did the player last play soccer? _____

How many years of soccer experience does the player have? _____ Where? _____

What other sports has the player participated in during the past year? _____

Are there any other in-house siblings that will be playing in the **same division** as the player? If so, please list: _____

RECREATIONAL PROGRAM DIVISIONS

- 1st & 2nd grade – PeeWee Division
- 3rd & 4th grade – MiniNovice Division
- 5th & 6th grade – Novice Division
- 7th, 8th & 9th grade – Senior Division

Is the player associated with a specific HYSA Rec team sponsor, and **must** play on that team? If so, please indicate which sponsor: _____

Is the player associated with an adult who will be coaching an HYSA Rec team in 2008? If so, please indicate which coach and explain the relationship: _____

Important... Please read and sign

As parent or guardian of the registrant, I acknowledge that all information entered on this registration form is accurate. I understand that all registration and any associated fees are non-refundable. I am fully aware that the HYSA board members create all teams, and requests to keep non-sibling players on the same team will not be taken into consideration.

Parent or Guardian Signature: X _____

WANT TO HELP?

HYSA is totally supported by volunteers. Please check any areas with which you might be interested in helping.

- First Time Head Coach
- Returning Head Coach
- Assistant Coach
- Team Mom or Dad
- Refreshment Stand
- Field Preparation
- Pizza Party Pickup/Setup
- Little Kickers Registration

Name: _____

Phone: _____

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Registration for first player: 1 X \$55.00

For each additional player: _____ X \$45.00 = _____

Total players registering: _____ Total Due: _____

Total Cash Received: \$ _____

Check Amount Rcvd: \$ _____

\$10 Late Fee Applied
After Ju

Date of Check: _____ Check No.: _____

Received by: _____ Date: _____