

SPORTS REGISTRATION

PLEASE ENROLL MY CHILD IN THE FOLLOWING SPORT:

Please complete this form and return it (with the appropriate registration fee) to the front desk at your Boys & Girls Club.

ONE FORM PER CHILD, PLEASE

SPORT: Aquatics Basketball Cheerleading
 Flag Football Soccer Volleyball

SKILL LEVEL: **Developmental** – Less than two (2) years playing experience
 Advanced – More than two (2) years playing experience

DIVISION: K-1st Grade 2nd-3rd Grade 4th-6th Grade 7th-8th Grade
Age (8/1 DOB cutoff) (4-6 yrs) (7-8 yrs) (9-11 yrs) (12-13 yrs)

PARTICIPANT INFORMATION:

Child Name: _____

Male Female DOB: _____ School: _____ Age: _____ Grade: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Session: _____

Home Phone: _____ Work/Cell Phone: _____

Mother/Guardian: _____ Father/Guardian: _____

Please choose a shirt size: Youth: XS S M L Adult: S M L XL XXL

GEOGRAPHIC PREFERENCE – League games in the KC Metro Sports League are played in various locations. Whenever possible, we attempt to coordinate games in accordance with player/family preference. We cannot always accommodate such requests, but we try. **Please rank the following areas in order of preference where you would prefer your child's games be played (e.g. first choice = 1, second = 2, third = 3):**

____ Eastern Jackson County ____ Midtown ____ South Kansas City

WE ARE ALWAYS IN NEED OF PARENT VOLUNTEERS!

I am interested in volunteering as: Head/Assistant Coach Manager/Supporter

Request a coach (optional): _____

FEES: \$10 – Current Club Member \$25 – Non-Member

PARTICIPATION RELEASE

I release the Boys & Girls Clubs of Greater Kansas City (BGCGKC), its coaches and officials from all claims of injury which may be sustained by aforementioned child while participating in any BGCGKC activity, whether caused by the negligence of BGCGKC or otherwise. If medical attention is required, I give my permission for such medical care. I also agree to follow the BGCGKC sportsmanship standards and guidelines. By signing below, I give BGCGKC permission to use photographs or videos of the named participant in its promotional/educational materials.

Parent/Guardian Signature: _____ Date: _____

OFFICIAL USE

Receipt #: _____ Staff Initials: _____ Date: _____

PAYMENT INFORMATION: Cash Money Order Credit Card