

**BOYS & GIRLS CLUB OF DENISON ATHLETICS**

**BOYS & GIRLS CLUB OF DENISON INDOOR SOCCER**

**Name of Player:**

**Age: DOB: Grade: (Circle One) Boy or Girl**

**Parents/Guardians Name:**

**Address: School Attending:**

**Primary Cell Phone: Secondary Phone:**

**Email:**

**Shirt Size: YS YM YL YXL/AS AM AL AXXL (Circle one)**

**Emergency Contact: Address: Phone #**

**Has your child participated in a Boys & Girls Club Event? YES or NO (Circle one)**

**REGISTRATION FEE $30 (INCLUDES JERSEY, AWARDS, GAMES, OFFICIALS!)**

**Call 903/465/9008 for questions or information or Email bgcdenisonsports@yahoo.com**

**GAMES WILL BE PLAYED ON THURSDAY EVENINGS**

**Registration Permission Form**

**The Boys&Girls Club of Denison nor any individual or organization assumes aby responsibility for damage, injury, or other problems, which arise directly or indirectly from anyone’s participation or involvement in anyway with this event/program. Having read and understood these conditions, the undersigned agree to participate in this event.**

**Furthermore**

**I, am the parent/legal guardian of , who participates in a Boys&Girls Club of Denison program. I understand that from time to time the Club or its agents may photograph or for promotional purposes only (non-commercial purposes) and do herby waive any and all claims for compensation to me or to my child for such photograph or videotapes. This grant and waiver shall be effective until withdrawn by me in writing and delivered to Boys&Girls Club of Denison Administration.**

**If you are interested in being a coach and can pass background check please check the box.**

**\*\*STAFF MEMBER\*\***

**Initial & Date after payment received**