

**St. Benedict Spring Soccer**  
**REGISTRATION DEADLINE: March 3, 2017**

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parish: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Text: (Y or N) \_\_\_\_\_ Parent Email: \_\_\_\_\_

\_\_\_\_\_ Yes, I would like to Coach.

\_\_\_\_\_ Yes, I would like to Help.



\_\_\_\_\_ \$55 ~ Soccer (Grades 1-8)

\_\_\_\_\_ Emergency Medical Authorization (EMA) – done for every Sport!

\_\_\_\_\_ CYO Contract Form – only needed 1 time per year

\_\_\_\_\_ Concussion Form – only needed 1 time per year

\_\_\_\_\_ \$12 Uniform fee only if you need a new one \_\_\_\_\_ Tshirt size

Coaches will contact you when practices are. Games begin Saturday  
April 1 , 2017

- **Make checks payable to: St. Benedict School**
- **All Fees are due at time of registration ~ return to School office in care of Athletics or Maureen Bishop**

**Any questions please feel free to contact me: Maureen Bishop at 419-531-1907 or [mbishop@stbenedicttoledo.org](mailto:mbishop@stbenedicttoledo.org)**

