REGISTRATION FORM FOR ST. LEO SPORTS PROGRAM

CHILD'S NAME: _____ GENDER: _____ GRADE: __

ADDRESS: _____ CITY: _____ ZIP: _____

HOME PHONE: _____ DATE OF BIRTH: _____

EMAIL ADDRESS: _____

T-SHIRT SIZE: (PLEASE CIRCLE)
YOUTH SMALL MEDIUM LARGE
ADULT SMALL MEDIUM LARGE XL XXL

SPORT PARTICIPATING IN: (PLEASE CHECK)
___ VOLLEYBALL ___ CROSS COUNTRY ___ BASKETBALL
___ CHEERLEADING ___ BASEBALL ___ FAST PITCH SOFTBALL
___ HIGH SCHOOL BASKETBALL ___ HIGH SCHOOL VOLLEYBALL

PARENTRAL INFORMATION:

FATHER'S NAME: _____ WORK/CELL PHONE: _____

EMAIL ADDRESS: _____

MOTHER'S NAME: _____ WORK/CELL PHONE: _____

EMAIL ADDRESS: _____

In accepting my son/daughter, _____ to participate in St. Leo's _____ (sport), I /we hold harmless the coaches, assistant coaches, St. Leo's Athletic Association, and all personnel of St. Leo's Parish for any injury or accidents arising out of, or in connection with playing said sport for St. Leo's.

I also agree that with my child's participation that I will volunteer at least 2 hours during the particular sport.

_____ _____
(Signature of Parent/Guardian) (Date)

I agree to abide by the rules of the coaches, assistant coaches, St. Leo's Athletic Association, CYO, and those affiliated with the parish in the participation of registered sport. By participating I agree to practices, as well as games, and showing sportsmanship above all else.

_____ _____
(Signature of Parent/Guardian) (Date)

Registration fees: $100 per Child **Late fees add an additional $20 per participant.**