

PLEASURE ISLAND SOCCER ASSOCIATION



Fall 2016 RECREATION LEAGUE Registration

PLAYER NAME: First: _____ Last: _____

ADDRESS: _____ (City) _____ (zip)

MALE or FEMALE Birth date: //20 On Aug. 1, 2016, I will be years old and in the Grade.

Uniform Size: YXS YS YM YL AS AM AL AXL

PARENT/GUARDIAN: FIRST: _____ LAST: _____

Phone Numbers: Home: - - - - - Cell: - - - - -

Best EMAIL address: _____ 2nd EMAIL address: _____

I want to coach my child's team: Yes No (you choose practice night, and receive \$10 Buffalo Wild Wings gift card)

I want to Sponsor my child's team: Yes No (\$250 for ages 3,4, 5. \$300 for all older ages. Sponsor's child plays free)

Waiver of Liability: We/ I, as the parent/legal guardian of the player named above, do hereby declare our intent to allow this child to practice, play, and participate in all programs and activities associated with the Pleasure Island Soccer Association, including any related activities and transportation. We/ I hereby release and hold harmless from any and all liability; Pleasure Island Soccer Association, its coaches, sponsors, associated board members and personnel, officials, or any others associated with this organization against any claim by or on behalf of the player's participation in this program.

Medical Consent Release: We/ I do hereby authorize Pleasure Island Soccer Association or any representatives including coaches, officials, or anyone associated with this organization, if after reasonable attempt has been made to reach the designated parent/guardian named above to consent, or if sound medical practice decrees that there is not time to make such an attempt, to consent to any x-ray, anesthetic, medical or surgical diagnosis or treatment or hospital care, to be rendered to the player under the general or special supervision and on the advise of any physician, dentist or surgeon duly licensed to practice, be indeed rendered to the Registrant

Fall 2016 Recreation Fees and Age Chart

Birth Date Range	Age Group	Grade	Gender	Early Bird	After July. 1
8/1/12 - 7/31/13	U4	PK	B/G	\$65.00	\$70.00
8/1/11 - 7/31/12	U5	PK	B/G	\$65.00	\$70.00
8/1/10 - 7/31/11	U6	K	B/G	\$65.00	\$70.00
8/1/09 - 7/31/10	U7	1	B/G	\$95.00	\$100.00
8/1/08 - 7/31/09	U8	2	B/G	\$95.00	\$100.00
8/1/07 - 7/31/08	U9	3	B/G	\$95.00	\$100.00
8/1/06 - 7/31/07	U10	4	B/G	\$95.00	\$100.00
8/1/05 - 7/31/06	U11	5	B/G	\$105.00	\$110.00
8/1/04 - 7/31/05	U12	6	B/G	\$105.00	\$110.00
8/1/03 - 7/31/04	U13	7	B/G	\$105.00	\$110.00
8/1/02 - 7/31/03	U14	8	B/G	\$105.00	\$110.00
8/1/01 - 7/31/02	U15	9	G	\$105.00	\$110.00
8/1/00 - 7/31/01	U16	10	G	\$105.00	\$110.00
8/1/99 - 7/31/00	U17	11	G	\$105.00	\$110.00
8/1/98 - 7/31/99	U18	12	G	\$105.00	\$110.00

X _____ X _____ / /
 Parent/ legal guardian (Print Name) Parent/ legal guardian (Sign Name) (date)

Mail check/money order payable to "PISA", PO Box 1868, Carolina Beach, NC 28428