P.O. Drawer 1768
GOOSE CREEK, SOUTH CAROLINA 29445
(843) 569-4242

2020 SPRING SOCCER REGISTRATION FORM

Return this form to the Community Center along with birth certificate, proof of residency and proper fee.

Acceptable forms of proof of residency

Homeowners: Drivers license or picture Id & most recent utility bill
Renters: Drivers license or picture Id, most recent utility bill & original rental agreement
Current address must be on all proofs of residency

PARTICIPANT'S NAME: _____ SEX: _____ AGE: _____

BIRTHDATE:_____ ADDRESS:_____ CITY: _____

ZIP CODE: _____ SUBDIVISON: _____ NAME OF MEDIAL INSURANCE: _____

CELL PHONE: _____ OTHER PHONE: _____ PERMISSION TO SEND TEXT MESSAGE: YES _____ NO _____

CELL PHONE CARRIER: _____ EMAIL: _____

DO YOU WANT TO PURCHASE PLAYGROUND INSURANCE? ($10) Yes _____ NO _____

ANY SPECIAL NEEDS TO BE AWARE OF? YES _____ NO _____

ARE YOU INTERESTED IN BEING A HEAD COACH THIS SEASON? YES _____ NO _____ IF YES, PLEASE COMPLETE A COACHES APPLICATION AND BACKGROUND CHECK.

SIZE FOR UNIFORM SHORTS: (circle one)	**YOUTH SIZES**:	X-SMALL	SMALL	MEDIUM	LARGE	
	ADULT SIZES:		SMALL	MEDIUM	LARGE	X-LARGE
SIZE FOR JERSEY: (circle one)	**YOUTH SIZES:**	X-SMALL	SMALL	MEDIUM	LARGE	
	ADULT SIZES:		SMALL	MEDIUM	LARGE	X-LARGE

**** PLEASE BE CERTAIN TO ORDER THE CORRECT SIZE, SHORTS & JERSEY ARE NOT EXCHANGEABLE OR RETURNABLE. SAMPLES ARE AVAILABLE IN THE OFFICE FOR SIZING.**

Waiver & Release of Liability: In consideration of being allowed to participate in Goose Creek Recreation sports, programs, related events and activities, the undersigned acknowledges and agrees that there are always risks involved in participation in recreational activities. I knowingly and freely assume all such risks, both known and unknown, even if arising from negligence and assume full responsibility for my participation. I declare the participant physically able to participate in the activity. In the event of a medical emergency, I authorize Goose Creek Recreation or its representatives to obtain emergency medical treatment for myself or child (if parent is not available). I willingly agree to comply with the stated and customary terms and conditions for participation. I , for myself and on behalf my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless City of Goose Creek Recreation, Goose Creek Recreation Commission, their officers, officials, agents, and /or employees, other participants, sponsors, and advertisers (releasees), with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releasees or otherwise, to the fullest extent permitted by law. I likewise release from liability, any person transporting myself or my child to and from these activities. I further grant GC Recreation the unencumbered right to make promotional use of any pictures and/or video tapes taken of the registrant while participating in this program. The City of Goose Creek has the right pursuant to the SC Setoff Debt Collection Act to collect any delinquent sums due through offset of the state income tax refund including all fees.

For participants under the age of 18 at the time of registration: This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above, for myself, my heirs, assigns, and next of kin, I release and agree to hold harmless the Releasees from any and all liabilities incident to the minor's involvement or participation in these programs as provided above, even if arising from their negligence, to the fullest extent of the law. I have read this release of liability and assumption of risk agreement and sign it freely and voluntarily.

THERE ARE NO REFUNDS ON GC RECREATION ATHLETIC PROGRAMS AND INSURANCE IS NON-REFUNDABLE. APPROVAL INITIAL _____

Signature: _____ Name (Print): _____
Parent/Guardian Signature

REQUESTS FOR SPECIAL TEAM ASSIGNMENTS WILL NOT BE CONSIDERED

FOR STAFF USE ONLY

Playing age: (as of 9/1/2020): _____ LEAGUE: Tiny Tot (4-5) Pee Wee (6-7) Small Fry (8-9) Mite (10-12)

DOES PARTICIPANT HAVE A BROTHER/SISTER IN SAME LEAGUE THIS SEASON? YES _____ NO _____ IF YES, NAME: _____

Birth Certificate on File? _____ RESIDENCY VERIFIED? _____ DATE REGISTERED: _____ STAFF INITIAL: _____