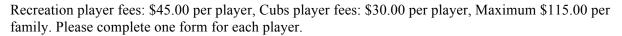
Litchfield Youth Soccer League Recreation R E G I S T R A T I O N

Registration deadline for the fall season is: August 26, 2012

Mail completed registration forms with check payable to LYSL to: LYSL Registrar, 9 Perry Court, Litchfield, NH 03052



Cougar Cubs is for players that are a year too young for our minimum recreation league age cut off. It is 6 sessions that meet once a week to teach basic soccer skills. The goal of the sessions is to help players become excited about soccer and have fun!!

PLAYER INFORMATION:

	First Name:		MI:	
Street:	City/Town:_		Zip:	
Phone:*Pursuant to the State of New Hampshire 30, 2012. Due to safety reasons there are	DOB: Soccer Association all play no exceptions.	_ Gender ers must be a minimun	Age:* n of age 3 by September	
Please check one:	Cubs yer's Birth date (10/01/08 –	9/30/09)		
Instructional Player's Birth date (10/01/06 – 9/30/08)	4v4	6v6 (10/01/01 - 9/30/04	Senior	
Parent's Name:	Phone:	I	E-mail:	
Parent's Name:	Phone:	1	E-mail:	
Emergency contact:		Phone:		
Physician contact:	Phone:			
LYSL Release: I, the parent/guardian or rules and regulations of the LYSL. Rec participation and in consideration for the confideration for the program"), I hereby release, discharge referees, coaches, assistants, and other by the program, against any claim by of in the program and/or being transporter	cognizing the possibility of the LYSL accepting the regnarge and/or otherwise ind volunteer personnel as well r on behalf of the registran	physical injury assoc istrant for its soccer emnify the LYSL inc l as the owners of the it as result of the regi	iated with soccer program and activities luding its officers, fields, facilities used strant's participation	
	Signature:		Date:	
Parent/Guardian (print):				
Parent/Guardian (print): CONSENT FOR MEDICAL TREATM player, I hereby give my consent for em Medicine or Doctor of Dentistry. This o preserve life, limb, or well being of my	ergency medical care pres care may be given under w	cribed by a duly licer	of the above named nsed Doctor of	