



Take My Child To Soccer

2023 - 2024

Fill out and return to Youth Sports Manager before season begins

Child's Name: _____ Age: _____ Grade: _____

Session (circle one): Fall Winter 1 Winter 2 Spring

*Parent must submit a form for each session of soccer child is participating in

Soccer Practice Day(s) of the Week: _____

Practice Start Time: _____ Practice End Time: _____

First Practice Date: _____ Last Practice Date: _____

Additional Info

It is the responsibility of the After School Sports coaches to take players to practice. It is also the responsibility of the After School Sports coach to return players to the ASP program if the parent does not pick up from the field following the conclusion of practice. In the event a child is not taken to soccer on their designated day at their designated time, no refund or credit will be issued.

Parent / Guardian Signature: _____

Date: _____



OFFICE ONLY

Signature of Youth Sport Manager/Coach: _____ Date: _____

Signature of After School Sports Director: _____ Date: _____