



SAINT ANSELM CYO
SOCCER REGISTRATION 2016
VARSITY BOYS AND GIRLS 7-8TH
JV GIRLS AND BOYS 5TH-6TH
CADETS GIRLS AND BOYS 3RD-4TH

Name: _____

Address: _____

Phone: _____

Date of Birth: _____

Grade: _____

School: _____

Religious Education:

Attending Catholic School School: _____

OR Attending CCD Parish: _____

OR Completed CCD program Parish: _____

Parent/Guardian Name: _____

Email Address: _____

Any Medical Conditions: _____

All players must fill out this form to register. No Exceptions.

Fees for Soccer will be collected when uniforms are distributed date TBA.

Practice time and dates will be announced and all players will be contacted.

Any questions contact Dave Pinkerton, Athletic Director (pinkerton@comcast.net)