



Maybee Recreation Spring Co-ed Soccer

Ages 4- 11, \$30 per athlete

Our spring soccer program will be played

Mondays 6-7pm beginning 4/15/24- 5/20/24

(weather makeup day to be the Thursday of the same week as original game)



Registration & \$30 Payment Due by **March 18th, 2024** accepted the following ways

- **Online:** Visit our website to complete the online form at recreation.maybeevillage.com
- **By Mail:** Send this form and the concussion form to Maybee Recreation PO Box 36 Maybee, MI 48159 with a check payable to "Maybee Recreation"
- **Email:** Send this form and concussion form to maybeerecreation@gmail.com with VENMO payment to @Maybee-Recreation
- **In-person:** Drop off your forms and payment to the Maybee Village Hall 9043 Raisin St Maybee, MI 48159. Office hours Tuesday- Thursday 8:30am- 1:30pm
- **In-person registration day March 11th 6pm-8pm at the Maybee Village Hall**
- Note that registration is not complete until the \$30 payment is recieved

Player Name _____ Birthdate _____ Age on April 1, 2024 _____
 Gender M or F _____ Address _____
 Parent/Guardian name (Primary) _____ Contact phone # _____
 Contact Email _____ Alternate Contact _____

Athlete Shirt Size: circle one- Youth **S M L** Adult **S M L XL 2X 3X**

Coaching? _____ If so, please indicate shirt size Adult **S M L XL 2X 3X**

Additional Fan Shirts are available for \$15 Adult **S M L XL 2X 3X**

Would you be interested in:

Coaching (one player registration waived)

Assisting the head coach



Sponsoring a team \$150

Sponsoring a banner \$150

Waiver of Liability- Read Carefully before Signing

In consideration of this registration being accepted. I hereby, for myself, my heirs, executor, administrators and assignees, waive and release all rights and claims for damages and losses I may have against the Village of Maybee, the Maybee Recreation Commission, and/or members units, their respective agents, representatives, successors, and assignees for any and all injuries suffered by the player listed above during the life of this contract. I also waive and release all rights and claims for damages and losses I may have against those listed above in the event the player listed above should contract the Corona Virus during the life of this contract. I agree to abide by the rules and regulations of the program and the Maybee Recreation Commission.

Parent/ Guardian signature _____ **Date** _____

Printed name of Parent/ Guardian _____

League use only: Form of payment: Cash \$ _____ Check \$ _____ Check # _____ Venmo \$ _____