

Player Registration Fee - \$35.00 Plus

CRRA Family Membership Fee - \$5.00	Cash Cheque
PLAYER INFORMATION	
Name:	M F
Date of Birth (d,m,y): F	Played CRRA Soccer before? Yes No
School Name:	Grade:
Medical Concerns/Additional Info:	
CONTACT INFORMATION	
Home Address:	
Home Telephone: Cell # 8	Contact Name:
E-mail:	
Parent/Guardian Name:	Relationship to Player:
Parent/Guardian Name:	Relationship to Player:
VOLUNTEER IN	NFORMATION
Name:	
Home Telephone:	Cell #:
Coach Referee	
Assistant Coach Fields and Net	Setup and Take Down
Soccerama Other (specify)	:
I do hereby release and hold harmless the City of Thunder Bay including a; employees and volunteers working and/or volunte River Recreation Association Soccer Club from liability for injurinvolvement and/or participation of any minor whom I am par I do hereby give consent for	eering on behalf of the City of Thunder Bay and the Current ry and/or illness that may occur as a result of my ent or guardian. to participate in any and all events
Recreation Centre. Parent Signature:	Date:
DIVIS	
	ı (Ages 7-10)
Squirt (Ages 5-7) Mosquito (Ages 10-14)	
*Note. Division ages may shift or an additional division may be added should registrations numbers increase, age as of Jan.1, 2019	

PLAY WITH A FRIEND

Please indicate if your child/children would like to play with a friend: