

Tantasqua Regional Youth Soccer, Ltd.

www.tantasquasoccer.com

T.R.Y. Recreation Soccer Fall Sign-Ups! Town of Wales

T.R.Y. Soccer Fall 2021 Recreation season sign-ups will be held at the Wales Elementary School on the following dates and times:



Saturday, June 5th ~ 10:00 – 12:00pm

Thursday, June 10th ~ 5:30 – 6:30pm

Saturday, June 19th ~ 10:00 – 12:00pm

Wednesday, June 23rd ~ 5:30 - 6:30pm

Registration Fee: \$35.00 per player

Checks payable to: Town of Wales

NON-REFUNDABLE UNLESS LEAGUE CANCELS

(Registration Closes August 1st)

Any registrations received after August 1st will require an additional \$15 per player late fee AND will be placed on a waiting list if needed.

Players must be 4yrs old by August 31st and

No more than 19yrs old on December 31st.

A birth certificate must be furnished to League officials upon request.

The League has added a PreK/K and a Jr. Team Only (7th and 8th grade)

If unable to make the above dates and times, please mail registration form with payment to the:

Town of Wales

Attn: Rec Department

3 Hollow Road, Wales, MA 01081

Visit **www.tantasquasoccer.com** for more information.

If you have any questions concerning your child's sign-up, please email your town coordinators Nicole Croteau at ncroteau47@gmail.com

******* REGISTRATION FORM ON BACK *******

Tantasqua Regional Youth Soccer, Ltd.

Please **PRINT CLEARLY** – EMAILS ARE HARD TO READ

Player Name: _____ D.O.B: ____/____/____ Sex: ____

Mailing Address: _____ Town _____ Zip _____

Home Address: _____ Town _____ Zip _____

Home Phone: _____ Cell Phone: _____

Parent/Guardian Email: _____

Played Soccer Before: ☐ No ☐ Yes Approx. number of Years: _____

Can reuse shirt from last year, only indicate shirt size if you are in need of a new shirt – size: _____

Parent or Youth would like to: ☐ Coach ☐ Assistant Coach ☐ Referee

Name: _____ Phone Number: _____

MANDATORY EQUIPMENT: Team Jersey, shin guards, athletic shorts (no pants), soccer socks, soccer cleats (no cleat at the toe) or turf shoes. Pee Wee division **only** may use sneakers.

PROHIBITED: Earrings or jewelry of any kind, baseball/football cleats (type with cleat at toe), long pants or shorts with zippers, snaps or other items deemed unsafe by a Referee.

By signing below, the above named child is to be at least four (4) years of age and no more than 19 years of age on December 31st of this calendar year. I will furnish a birth certificate of the above named child to League Officials upon request. As a team player's parent/guardian, I will demonstrate self-control and respect for others at all times, be they officials, spectators, or other athletes. I will not be crude or have abusive language with players, officials, spectators or other athletes. I will accept the judgment of the coach(es) and officials. I will be positive and promote good sportsmanship.

Players will be assigned to appropriate soccer division based on T.R.Y. Soccer age guidelines.

No exceptions. All teams are Co-Ed.

Parent/Guardian Name (Print): _____

Parent/Guardian Name (Signature): _____ Date ____/____/____

League Use Only:

Player's Age on September 1st of Playing Year

[PreK/K]

[1ST – 2ND]

[3RD – 4TH]

[5TH – 6TH]

[7TH – 8TH]

[HIGH SCHOOL]

Age: _____ Division: _____ Team: _____

☐ Check # _____ Name on Check: _____ Amount \$ _____