

## Winslow Township Youth Soccer Association Spring 2012 Season Registration – Recreational Program

Registration for the Spring is open to all boys and girls born between 08/01/1995 thru 12/31/2007. First time players in our soccer association must show a birth certificate to confirm age at the time of registration. You don't need to be a resident of Winslow Township to play in our club, so please pass the word to friends and neighbors. Please refer them to our website for more information.

**Registration Fees:** Checks and/or money orders made payable to WTYSA, Cost is \$70 per player. Register before Jan. 23, 2012 and receive a \$10 discount.

**Register On-line:**

Refer to WTYSA website: [www.WinslowSoccer.org](http://www.WinslowSoccer.org). There are no additional fees to registering online.

**Register by Mail:**

Send completed registration form and payment to:

WTYSA Office  
Post Office Box 169  
Sicklerville, NJ 08081



*If first time player, a copy of their birth certificate must be mailed along with their registration.*

(Will be destroyed after verification of age)

**In-Person Registration**

Peter Volpe Park	Friday, Jan. 20, 2012	7:00pm until 9:00pm
Sickler Avenue	Saturday, Jan. 21, 2012	10:00am until 2:00 pm
Sicklerville, New Jersey	Friday, Feb. 24, 2011	7:00pm until 9:00pm
	Saturday, Feb. 25, 2011	10:00am until 2:00pm

➤ Please refer to our website for directions to Peter Volpe Park (found under WTYSA Club Info)

All games are played on Saturdays; the first games are scheduled for April 14th and will continue for 8 weeks. No games Memorial weekend. Contact Vince D'Antonio at 856/385-7145 for any additional questions.

A \$10 fee will be charged to cancel each completed registration.

Deadline for all registrations is February 28, 2012.

Register early and receive a \$10 discount, ends January 23rd

**Please Print All Information CLEARLY!**

**Please Use One Registration Form For Each Player**

Player's Name: \_\_\_\_\_ Male \_\_\_ Female: \_\_\_\_\_

1<sup>st</sup> Time Winslow Soccer Player? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_ If **Yes**, a copy of birth certificate **must** be provided.

Street Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Phone (if applicable): \_\_\_\_\_

E-mail Address: \_\_\_\_\_

\*\* Please provide e-mail address; this is the fastest way for WTYSA to send information to all members.

All of the people who run the WTYSA are volunteers. We are in need of volunteers in all areas. Please consider volunteering to enhance your child's experience as well as having a unique experience of your own.

Team Coach: \_\_\_\_\_ Team Asst Coach: \_\_\_\_\_ Division Commissioner: \_\_\_\_\_

Field & Equipment Asst: \_\_\_\_\_ Booster Club: \_\_\_\_\_ Concession Stand: \_\_\_\_\_

(For WTYSA Official Use Only)			
Amount Paid: \$ _____	Check #: _____	Cash: _____	Money Order #: _____
D/O/B Confirmed: _____	WTYSA Initials: _____	Confirmation #: _____	