

SOLANCO LACROSSE CLUB

Spring Lacrosse Registration Form

Instructions: The following information is critical to the management of the club. Please complete the form and print clearly. One form is needed for each student athlete.

Registration Fees: Make all checks payable to: 'SOLANCO LACROSSE CLUB'

H.S. Boy's(U18) = \$125 M.S. Boy's(U14/U12) = \$125 Elementary Boy's(U10) = \$125
H.S. Girl's(U18) = \$125 M.S. Girl's(U14/U12) = \$125 Elementary Girl's(U10) = \$125

Player's First Name: _____

Player's Last Name: _____

Date of birth _____ Grade (current school year) _____

School: _____

Home Address: _____

Player Health Concerns: _____

Player's E-mail Address: _____

Player's Phone Number: _____

Parent / Guardian Name: _____

Parent / Guardian Email Address: _____

Parent / Guardian Phone Number : _____

Parent / Guardian Signature: _____

---Club Use ---

Jersey Number _____

Amount Paid _____ Date paid _____ Check Number _____

U.S. Lacrosse # _____ U.S. Lacrosse Expiration date _____