

# Sanbornton Recreation Youth Soccer

**When:** 1st week of September thru October 21st **Where:** Sanbornton Town Park: 180 Shaw Hill Rd

## **Coaches for ALL age groups are needed!**

**4<sup>th</sup> - 6th Grade:** Monday and Wednesday practices starting September 6<sup>th</sup> 5:30-7pm; Saturdays 9am-10:30am. This group will be separated into teams and will play games in the evenings (replacing practices) and Saturdays versus area towns.

**2nd & 3rd Grade:** Tuesday or Thursday (coach dependent) practices starting September 5<sup>th</sup> from 5:30-6:30pm; Saturdays 9am-10:30am. This group will be separated into teams and will play games in the evenings (replacing practices) and Saturdays versus area towns.

**Kindergarten & First Grade:** Saturdays 10:45am-12:00pm starting September 9<sup>th</sup> and one night a week of skills & drills (that night is TBA) This group will play a few games on Saturdays versus area towns towards the end of the season.

Preschool (ages 3-5): Saturdays 10:45- 11:30am 30-minute skills & drills one day a week

Interested in coaching please contact Amanda Pelissier at sanborntonrecreation@gmail.com All coaches must complete and pass a criminal background check and we cover the cost. We will be using the GameChanger Team Manager App this year for easy communication. The app is available in the Apple Store & Play Store for Android for free.

- Registrations are currently being accepted
- Fee: Residents: \$30 Family \$45 Non-Residents: \$40 Each additional member \$25
  \*A resident is someone who attends a Sanbornton school or resides in Sanbornton\*
- September 9th is the last day to register!
- Financial assistance is available for Sanbornton Residents (must contact Amanda at least 2 weeks prior to start of the season)
- Completed registration & payments can be dropped off at the new Sanbornton Town office or mailed to PO Box 124 Sanbornton, NH 03269 with a check made payable to Sanbornton Recreation

#### Refunds are only issued if we are unable to run the program.

### 2023 Sanbornton Soccer Preschool - 6th Grade

Participant Name:	D.O. B:		Gender:			
School Name:	Age:	T-Shirt Size:				
Participant Name:		_D.O. B:	Gender:			
School Name:						
Parent or Legal Guardian Information:						
	Mailing Address:					
Main Phone:						
Parent or Legal Guardian Information:						
Name:	Mailing Address:					
Main Phone:						
Alternate Chaperone:						
Name:	Relationship:					
Main Phone:		Email:				

#### Please initial all sections below:

□ I give permission for my child (listed above) to participate in Sanbornton Recreation Soccer. I assume all risks and hazards incidental to such participation and do hereby waive, release, absolve, indemnify, and agree to hold harmless Sanbornton Recreation Commission, its members, the program instructors, the Town of Sanbornton, and its officials.

□ In case of an accident, I request the Sanbornton Recreation or any of its representatives contact me. If I am not available, call the physician named below and follow his/her instructions. If it is impossible to contact this physician and it is an emergency, I hereby authorize any treatment deemed necessary for my child.

□ I give the Sanbornton Recreation Program permission to photograph my child and post on the Sanbornton Recreation Facebook Page, Sanbornton Instagram Page or put in Sanbornton Recreation Newsletters.

Ph	vsician	Name:

Phone: \_\_\_\_\_

Please list any medical conditions/allergies that we should be aware of:

By signing below, I confirm that I have read and understand all of the information in this document.

Signature:			Date:	
FOR OFFICE USE ONLY Name:			Date:	2023
□Pre-K – 6th Grade Resid	lent Individual: \$30 F	amily \$45 total	□Non- Residen	ıt Individual: \$40
□Cash Payment \$	Receipt #:	Check P	ayment: \$	Check #: