

2011-2012 St. Monica CYO Athletics Registration

Separate Checks for Fee and Deposit. Do *not* combine into one check.

(put an X on the sport line that is currently being registered)

X	Sport	Fee/Dep	Check #	Adult
	Participation Fee 1-time fee, per family, per year	\$20		XXXX
	Football	\$100 / \$105		XXXX
	Cheerleading	\$60 / \$105		XXXX
	Cross Country	\$60 / NA		S M L XL
	Fall/Spring Kickball	\$60 / NA		XXXX
	Girl/Boy Basketball	\$90 / \$85		XXXX
	Volleyball	\$80 / \$75		XXXX
	Baseball	\$75 / \$55		XXXX
	Softball	\$75 / NA		S M L XL
	Soccer	\$65 / \$25		XXXX
	Track & Field	\$60 / NA		S M L XL

Today's Date _____

Grade Level 2011/12 _____

Parish _____

School _____

Athlete info :

Name _____

Date of Birth _____

Address _____

Zip _____

Home Phone _____

The participation fee is a one-time family fee per year only. It is required for the first sport played per school year.

Parent Info :

Mother

Father

Name: _____

Work Phone: _____

Cell Phone: _____

E-mail Address: _____

Athlete's Medical Info :

Physician Name/Phone: _____

Allergies/Medical Conditions: _____

My/our child has permission to participate in the sport marked above during the 11-12 school year at St. Monica Parish. I/we realize that it is my/our responsibility as parents to participate in the athletic program by assisting with transportation to all games, taking door admission, concession duty, scorekeeping, and helping with fundraising events. I/we understand that the athlete represents St. Monica Parish, and it is the responsibility of the coaches to foster an attitude of sportsmanship, ethical conduct, and fair play and to correct the athlete when the ideals are violated. I/we agree to pay all fees and uniform deposits at the time of registration and are not registered for a sport until fees/dep are paid. CYO reserves the right to charge additional fees or deny acceptance for late registrations. I/we understand that all deposits will be held by the Athletic Committee and will be returned or destroyed when the uniform/equipment is returned, provided it is **returned when requested, clean, and in the condition it was received.** If the uniform/equip is received late, not clean, or has been damaged, the AC will withhold all or a portion of the deposit fees as a late charge, cleaning/repair fee, or total replacement of the uniform/equipment. I/we understand that a failure to return a uniform will result in forfeiture of the complete deposit. **NO fees will be refunded after the athlete has been placed on a team through evaluations or after the first day of a team's practice.**

A CYO Health Form must be completed with athlete's info and a physician's signature and returned to the AC (an AC Board member) before the first practice to be eligible to participate in that practice. All physicals must be dated on/after May 1st. I have read this entire form and by signing do agree to abide by its contents.

Parent Signature: _____

AC Representative: _____