

Coach P's Registration Form:

Cheque or cash payable to Donald Pacheco, 40 Amos Street,  
250-639-1323

Name of player \_\_\_\_\_ Age \_\_\_\_ Sex \_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Tel (250) \_\_\_\_\_

T-shirt size (circle one ) Youth S, M, L, XL

Adult S, M, L, XL

Waiver release:

My child \_\_\_\_\_ is in good health and has my permission to participate in the Soccer camp. I release the coaches and KYSA. I hold and save them harmless from any injury and all actions, claims, demands, liabilities ,loss, damage or expense of any kind in participation with the Coach P'S Soccer Camp.

Any Medical Conditions: Yes or No (circle one) \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_