



Pavilion GOAL GETTER Registration Form

Please fill this form out and return it to the Pavilion along with payment, and Signed Waiver.

Name: _____ Sex: M F Birthdate: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Parents Name (if under 18): _____
 Emergency Contact: _____ Phone: _____
 Health Insurance: _____ Policy #: _____
 E-Mail: _____

Session Registering For :

FALL

WINTER 1

WINTER 2

SPRING 1

SPRING 2

Class(Circle One) Age 1-3 Age 4-5 Age 6-8 Homeschool

Amount Paid: \$ _____ Payment Type: _____ Check #: _____ Date: _____ Manager: _____	Amount Paid: \$ _____ Payment Type: _____ Check #: _____ Date: _____ Manager: _____	Amount Paid: \$ _____ Payment Type: _____ Check #: _____ Date: _____ Manager: _____	Amount Paid: \$ _____ Payment Type: _____ Check #: _____ Date: _____ Manager: _____	Amount Paid: \$ _____ Payment Type: _____ Check #: _____ Date: _____ Manager: _____
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REMINDERS & POLICIES

- ◆ Bring your own necessary and Pavilion required equipment and safety gear.
- ◆ Required indoor soccer gear as follows: shin guards (covered with knee socks); appropriate indoor turf shoes (ask Pavilion staff).
- ◆ You must abide by the posted "Facility Rules" and the "Code of Sportsmanship and Conduct".
- ◆ All forms (registration, waiver) must be submitted and all fees paid prior to the first class.
- ◆ Classes may have to be rescheduled due to weather factors or other reasons.