

St. Stephen the Martyr Sports Club Registration Form

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Participation requires current enrollment in either St. Stephen the Martyr School or Religious Education

Check the box and circle the fee you are paying for the sport you are currently enrolling in. When two fees are listed, the first fee is if you need the current team shirt/uniform while the 2nd fee is if you don't need the current team shirt/uniform.

Add \$10 if you miss the deadline. Make checks payable to: SSM Sports Club

***Flag football fees are \$30 for 1st graders and \$65 for 2nd & 3rd graders. You may deduct \$20 if you can use the jersey from last year. *Volleyball fees are not refundable after tryouts.**

Fall Sport Deadlines:

May 1 for volleyball
June 1 for other sports

Winter Sport Deadlines:

October 1

Spring Sport Deadlines:

January 1 for Soccer
February 1 for other sports

- Flag Football* (\$30/\$65)
- Volleyball* (\$75/\$55)
- Cross Country (\$35/\$25)
- Micro Soccer (\$25)
- Girl's Soccer (\$45)
- Boy's Soccer (\$45)

- Boy's Basketball (\$50)
- Girl's Basketball (\$50)
- Intramural Basketball (\$45/\$30)

- T-Ball (\$55)
- Baseball (\$65/\$55)
- Track (\$35/\$25)
- Micro Soccer (\$25)
- Girl's Soccer (\$45)
- Boy's Soccer (\$45)

Soccer only:

Coaching request: _____
Teammate request: _____

T-ball only:

I will be attending the clinic Yes No

Volleyball only:

I do not need uniform, my uniform number is: _____

Registrant's Information (please print):

First Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip: _____

Current grade (circle one): Preschool K 1 2 3 4 5 6 7 8 Gender: Male Female

Social Security Number: _____ - _____ - _____ Birth Date: ____/____/____
(Social Security Number is REQUIRED for CYSL soccer)

Youth T-shirt size: Small Medium Large
Adult T-shirt size: Small Medium Large

Soccer only:

Micro (1): Born between: 8/1/00 & 4/01/02 Micro (2): Born between: 8/1/99 & 7/31/00
Under 8: Born between: 8/1/97 & 7/31/99 Under 10: Born between: 8/1/95 & 7/31/97
Under 12: Born between: 8/1/93 & 7/31/95 Under 14: Born between: 8/1/91 & 7/31/93

Football, Volleyball, Basketball and Baseball:

Youth short/pant size: Small Medium Large
Adult short/pant size: Small Medium Large

Parent Information (please print):

Father/Guardian's First Name: _____ Last Name: _____
Father/Guardian's Phone #: _____ Cell #: _____ Email address: _____
(Mandatory)

Mother/Guardian's First Name: _____ Last Name: _____
Mother/Guardian's Phone #: _____ Cell #: _____ Email address: _____
(Mandatory)

I have taken the Safe Environment class offered through the Omaha Archdiocese and am willing to help with the following (Registration fee is waived for the head coach, except for Micro Soccer coaches):

- Head Coach
- Assistant Coach
- Help periodically
- Year-end party

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Health Information (please print):

Family doctor's name: _____ Phone #: _____ - _____

Insurance Carrier and policy #: _____

Date of last tetanus/diphtheria immunization: ____/____/____

Allergies (medications, food, plants, insects, etc...) _____

Medications (list those currently taking and for what condition: Medicine: _____

Condition: _____

Other medical / physical limitations the coaches should know about: _____

Does the coach / volunteer have permission to seek medical attention for your child if necessary: Yes No

Please list two emergency contacts and phone numbers in case of an emergency and we cannot reach you:

Contact 1: _____ Phone Number: _____

Contact 2: _____ Phone Number: _____

Waiver:

I/we the parents of _____ a participant in the St. Stephen the Martyr Sports Club Programs, hereby give my/our approval of our child's participation in any and all St. Stephen the Martyr Sports Club sponsored activities and events during the **years 2005-2006**. I/we assume all risks and hazards incidental in such participation including transportation to and from activities, and I/we indemnify and agree to hold harmless its organizers, sponsors, and all qualified staff and all persons transporting my/our child to and from activities, from any and all claims for negligent acts and omissions. Coaches, managers and assistants or anyone who prepares any playing field shall not be liable for the injury, or death of any participant in the St. Stephen the Martyr Sports Club Programs which results from the negligence of any of the above listed individuals. Notwithstanding the above stated language and without the waiver of any defense or immunity, under Nebraska statues or common law for any protected person, the execution of this release/waiver and hold harmless agreement, limits the signer(s) of his/her child's right to recovery to any applicable insurance policy(s) of the St. Stephen the Martyr Catholic Church. I certify that I carry adequate health, accident and liability insurance presently in force covering my child and that I will continue such coverage at my expense while he/she participates in St. Stephen the Martyr Sports Club sponsored activities and events.

Parent/Guardian's Name: _____

(Print)

Parent/Guardian's Name: _____

(Signature)

Date

Payment Method: Check payable to SSM Sports Club Auto Payment* (Sign agreement below)

Auto Payment: I currently have an EFT authorization on file with St. Stephen the Martyr Parish for this purpose. Please debit my checking or savings account for \$_____ currently set up for school lunches for this registration.

Signature (required for EFT payment)

Date

*The Sports Club will not have access to your account. The Parish Office will withdraw the money and make payment to the Sports Club on your behalf.