

Age Group U\_\_\_\_\_ Boys/Girls Bib #\_\_\_\_\_ Fee paid\_\_\_\_\_  
Color\_\_\_\_\_

## Pittsfield Soccer Club

### Fall 2009 Tryout & Registration Information

Players Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Grade in Fall: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-mail address: \_\_\_\_\_

If player is placed on a PSC Travel Team I choose the following payment option (\$200.00 minus my \$50.00 registration/tryout fee):

- Pay \$150.00 by July 13, 2009 and not fundraise.
- Pay \$100.00 by July 13, 2009 and receive \$50.00 worth of car wash tickets for car wash to be held August 23, 2009. The \$50.00 from fundraising is due by August 14, 2009.

I understand all fees paid are non-refundable with the exception of the tryout fee if my child is not chosen for a PSC travel team or if my child has a medical condition with a doctor's note.

I also understand that I will be required to volunteer for a 2 hour shift at the PSC sponsored Kick-Off Classic Soccer Tournament to be held September 5<sup>th</sup> – September 7<sup>th</sup>, 2009.

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Date