

**MARY, QUEEN OF HEAVEN SPRING 2012 REGISTRATION FORM FOR U6 SOCCER**



**\*\*\*\*\*All registrations and payments are due BY November 5, 2011 \*\*\*\*\***

**REGISTRATION INSTRUCTIONS:**

- Use this form for Under 6 registration only. Players born after July 31, 2005 should use this form.
- Cost for the 6-week session is **\$40**. Weekly practice / game sessions will take place at MQH on **Sundays, 4-5pm**.
- Please return complete form via email to [christian.rogiers@fuse.net](mailto:christian.rogiers@fuse.net).
- Send a check, make payable to "Mary Queen of Heaven Athletic Department" to:

Mary Queen of Heaven U6 Soccer, c/o Christian Rogiers  
2159 Conistan Court  
Hebron, KY 41048

- Registrations are accepted on a first-come, first-serve basis. There is no guarantee of placement on a particular team, with particular other players, or a particular coach.
- Registrations will not be accepted over the phone.

Player Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Gender: M \_\_\_\_\_ F \_\_\_\_\_

Did the child play at MQH in 2011? Yes \_\_\_\_\_ No \_\_\_\_\_

Method of Payment (\$40) Cash \_\_\_\_\_ Check \_\_\_\_\_

Home Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

Mother / Father / Guardian Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you wish to volunteer to Head Coach? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you completed the VIRTUS course? Yes \_\_\_\_\_ No \_\_\_\_\_

Coach's Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_