2026 High School Girls Indoor Soccer Team Registration Form

Player Information

Player's Name: _____

Current Grade: _____

High School Name: _____

Coach/Team Representative:_____

Parent/Guardian Information

Parent/Guardian Name(s): _____

Phone Number: _____

Participation Details

- **League:** 2026 High School Girls Indoor Soccer
- **Cost:** $50 per player

Waiver & Parent/Guardian Consent

I, the undersigned parent/guardian, give permission for my child to participate in the 2026 High School Girls Indoor Soccer League. I understand that the Carlinville Park District, its staff, and volunteers are not responsible for any injuries that may occur during practices, games, or related activities.

Parent/Guardian Signature: _____

Payment Options

☐ Cash
☐ Check (payable to *Carlinville Park District*)
☐ Debit/Credit Card (email rbyots2124@gmail.com for an invoice)