

St. John's Athletic Association

Registration Form

Track 2010

Welcome and thank you for participating in the St. John's Athletic Program. Our coaching staff is looking forward to working with you and your athletes this season.

Mail-In Registration must be received by: 3/1/2010

Track Season: 3/8/10 - 5/29/10

Payment is due upon registration.
No late registration will be accepted without a \$25.00 late fee.

Please print all information below:

Name: _____ Sex: M F
First Middle Last Circle

Address: _____ Phone: (____) _____
Street Area Code

City: _____ State: _____ Zip: _____ Date: _____
Registration Date

Date of Birth: _____ Present Grade: _____ Parish: _____
Month-Day-Year

E-mail Address: _____

Name of School Attending: _____ Township: _____

Do you or will you be playing this sport for your school? Yes No
Answer only if other than St. John's Circle

Are you enrolled in CCD? Yes No
Circle

Consent of Parent(s) or Guardian(s):

I (we) the parent(s) of the above named applicant for membership in the St. John's Athletic Association hereby give my (our) permission to my (our) child to participate in any and all activities. I (we) assume all risks incidental to such participation, including transportation to and from the activities. I (we) do hereby waive, release and agree to hold harmless St. John's CYO, Officers, Sponsors, Managers, Coaches, Referees, Participants and Persons transporting my (our) child to and from the activities, for any claim arising out of an injury to my (our) child.

Signature of Parent/Guardian: _____ Date: _____

Medical Condition(s)/Medication(s)/Insurance Information

Please list any medical condition/or medication taken that St. John's Athletic Association should be aware of for the participant during this sporting season.

Write None if no medical condition/medication is needed

Medical Condition/Medication _____
Medical Condition/Medication
 Date: _____ Policy Number: _____

Signature of Parent or Guardian
 Insurance Company Name: _____ Group Number: _____

Identification Number: _____ Remarks: _____

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Fees/Contributions

Registration Fee : \$35.00
Number of registrants _____

List additional names and information on a separate application.

Please make check payable to St. John's CYO **Total:** \$ _____

St. John's Athletic Association is soliciting sponsors to defer the cost of the sports program.

Yes, I would like to make a contribution to help offset the cost of the sport program:

_____ \$ _____
Signature of Contributor

Questions Call Bob Malone at 215-295-2387

Mail In Registration: Please make check payable to St. John's CYO
c/o Bob Malone
12 Oakdale Blvd
Yardley, Pa. 19067

Volunteers

The success of the St. John's Athletic Program is in your hands and we need volunteers for assistant coaches and meet assistants. Please check the item below if you are able to help the program. Thank you.

Assistant Coach _____ Meet Assistant _____

St. John's Athletic Association Pledge

The parents and coaches of St. John's will remember that the game is for the children and not adults. The parents and coaches of St. John's will do their best to make youth sports FUN for your child.

Select uniform size

Child	SM	MED	LG	
Adult	SM	MED	LG	XLG

St. John's CYO Track
Registration Information
2010

Age Groups:

Subnovice	Grades 1 - 3
Novice	Born in 1999 - 2000
Minor	Born in 1997 - 1998
Cadet	Born in 1995 - 1996

Events:

Novices, Minors, and Cadets can compete in the 100M, 200M, 400M, 800M, 1600M, 4x800M Relay, 4 x 200M Relay, 4x100M Relay, Long Jump, High Jump and Shot Put. Cadets may also compete in the Triple Jump.

Subnovices can compete in the 100M, 200M, 400M, 4x100M Relay, 4 x 200M Relay, and Long Jump. Third graders can also compete in the 800M.

Practices:

Place: Pennwood Track
Four 1-hour practices per week; days and times to be determined.
Subnovices will practice 2 times per week.
Practices will start in early March.

Meets: Sundays in April and May, generally from 1:00 to 5:00 P.M.

Equipment: Light running shoes/sneakers, water bottle, blue gym shorts, track shirt (paid for with registration fee), sweatpants and sweatshirt.
(See below if you wish to order SJE Track sweatshirt or sweatpants.)

Registration Fee: \$35.00

Coach: Bob Malone 215 295-2387

Volunteers: Volunteers are needed for assistant coaches and meet assistants.

Sweatshirts: SJE Track sweatshirts and sweatpants are available for members and family. The sweatshirts will be gold hoodies (blue for subnovices) with the athlete's last name on the back. If you want to order, please indicate size below and prepare a separate check made out to St. John's CYO.

Sweatshirt				Sweatpants				
Child	S	M	L	S	M	L		
Adult	S	M	L	XL	S	M	L	XL
_____	number of sweatshirts			X	\$23.00			
_____	number of sweatpants			X	\$15.00	=	\$_____	
	Total						\$_____	