

**REGISTRATION SATURDAY MARCH 9, 2024**  
**9:00-11:00 AT THE TOWN HALL**  
**REGISTRATION DEADLINE IS Friday APRIL 19<sup>th</sup>**

*\*Please sign up as soon as possible to determine league status\**  
A drop box is located at the back door of town hall for your convenience.  
**Please use a separate form for each child registered.**  
Make checks payable to Colden Recreation  
\*\*In honor of fairness, requests will not be taken.

## Colden Soccer

Leagues	Amount	Selection Box
Pee Wee 4-5 & 6 (6 year olds still in Kindergarten) **	\$12.00	
Midget 6-9 (6 year olds in first grade) **	\$15.00	
<b><u>**June 1st is the birthday cutoff. Age 7 before June 1<sup>st</sup></u></b> <b><u>move up a division</u></b>	<b>Shirt Size</b>	Youth: S M L Adult: S M L XL

**THERE IS A FAMILY MAXIMUM FEE OF \$40.00**

NAME \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ AGE \_\_\_\_\_ GRADE \_\_\_\_\_  
STREET \_\_\_\_\_ BIRTHDATE \_\_\_\_/\_\_\_\_/\_\_\_\_  
TOWN \_\_\_\_\_ ZIP \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
E-MAIL ADDRESS \_\_\_\_\_ NUMBER OF YEARS PLAYED \_\_\_\_\_

**\*\*MOMS & DADS – Volunteer to coach and your child can play for FREE!**  
**I would like to be contacted about Coaching \_\_\_\_\_/Assisting \_\_\_\_\_**

### EMERGENCY CONTACT AND HEALTH INFORMATION

Parent's Names \_\_\_\_\_  
Street \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work Phone \_\_\_\_\_  
If I cannot be reached please contact:  
Name \_\_\_\_\_ Phone# \_\_\_\_\_ Relation to Child \_\_\_\_\_  
Health Condition or Allergy \_\_\_\_\_

**I hereby give my child permission to participate in this recreation program.**

**Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_**

Find more Recreation Registration Forms online @ [www.townofcolden.com](http://www.townofcolden.com)