



St. Joseph's Athletic Association
Imperial, MO 63052



Sports Registration Form

For: Boys Girls

- Soccer Volleyball Basketball Baseball Softball Teeball Golf Lacrosse Track

Please print.

Child's name _____ Present grade _____ Grade in Fall _____

Birth date (month, day, year) _____ Phone number _____ Alt. phone number _____

Parent's name _____ E-mail _____

Address _____ City _____ Zip _____

Child's school _____ School district _____

Parish school of religion: Yes No If yes, what night? _____

Previous Coach _____

MY CHILD MAY BE PLAYING FOR ANOTHER TEAM IN THIS SPORT. Yes No

I give my permission for my son/daughter to play the above sport organized by the St. Joseph's Athletic Association. I hereby release St. Joseph's Parish, St. Joseph's Athletic Association and the team coaches from all liability due to injuries sustained by my child while he/she is participating in the Parish-sponsored activity. I also, in my absence, do hereby give my consent for a representative of St. Joseph's Athletic Association to take my son/daughter to the hospital for emergency medical care in the event of injury sustained during this Parish-sponsored activity.

Signature of Parent/Guardian _____

I would like to volunteer my services as: Manager Assistant Coach

I have attended Protecting God's Children class.

I have attended Coaching Concepts Clinic. My Coaching Concepts number _____

**Note: A workers fee deposit per family is required with all sign-ups.
A uniform fee deposit per jersey is required with all sign-ups.**

FOR SJAA USE ONLY

League fees _____

Number of children _____

UNIFORMS

Worker's fees _____

Date _____

Size shirt _____

Fundraiser _____

Received by _____

Size pants _____ (baseball and softball only)

Total _____

Cash Check _____

Uniform number _____

Uniform deposit check number _____

WHITE / LAY DIRECTOR

YELLOW / COACH

PINK / TREASURER

GOLD / UNIFORM MANAGER