## Macdonald Soccer Registration - Sanford

## Complete the form below and return to Shauna Hewitt

The Macdonald Soccer League is a recreational soccer program played among the communities in the R.M of Macdonald. The program runs during the months of May and June. Depending upon registration, each community will organize a team/teams of boys and girls (mixed) from each age group. Each team will practice & play on Tuesdays & Thursdays. The emphasis of this program is: skill development, cooperation, friendship, fair play, moderate competition and having a great time. The Sanford community will also be offering a Learn to Play program for 4 & 5 year old children. These young soccer enthusiasts will be introduced to the game of soccer in a fun and recreational environment once a week. Please see age requirements below (as of December 2025).

**4 & 5 year olds** - Learn to Play (Wednesdays only) 6 & 7 year olds - Mini Soccer (Tues/Thurs)

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8 & 9 year olds – Modified Regulation Soccer (Tues/Thurs) 10, 11 & 12 year olds\*\* – NON league, recreational play (Tues only)

REGISTRATION FEE: \$45.00 per player; \$80.00 per family

\*\* Registrations are due Friday, March 28.\*\*

## THERE WILL BE A LATE FEE of \$60/player

Contact Shauna with questions: sdhewitt1975@gmail.com

\*\* 10, 11, & 12s - fee of \$30 payable to Sanford Soccer to cover equipment and line painting. \*\*

Please complete the following registration (one form per player) and return with cash or cheques payable to Sanford Soccer to: Shauna Hewitt, Sanford Soccer Program; Box 211; Sanford, MB R0G 2J0

Player's Name:		Played Previously (Please Circle) <u>Yes/No</u>
Gender: Male Fe	emale	
Address:	Town:	
Postal Code:		
Birthdate	Age on Dec. 31	Current Grade
Parent/Guardians:	Ema	il:
I am willing to: Coach F	Help Coach	_
needed during the Macdonald Minor Socca Macdonald Minor Soccer Program from a ward may have and any and all loss damag	urgical treatment for myself er Program. I hereby relea- ny claims, action, demands e or injury sustained by me/s	/my son/my daughter/my ward if such treatment is use all persons involved in the organization of the or damages of any kind whatsoever my child/my my child/my ward or my/his/her equipment during, inderstand the risks involved in participating in the
Signature	Date	