

**STAA 2024 Kindergarten - 4th Registration Form**  
Please Verify All Data and Make Any Changes on This Form

Record #
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Student \_\_\_\_\_ Grade \_\_\_\_\_ Birthdate \_\_\_\_\_

Parents Last \_\_\_\_\_ Parents First \_\_\_\_\_

Email \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Very important**

Date Form Turned In \_\_\_\_\_

Date Physical Turned In \_\_\_\_\_

As the parent(s), I/we have read the Code of Conduct and agree to follow and abide by these written policies. I/we hereby affirm with my/our signature(s).
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As the parent(s), I/we agree that my son/daughter may play on teams which are above his or her grade level. I/we hereby affirm with my/our signature(s).
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\_\_\_\_\_  
Sign & Date

\_\_\_\_\_  
Sign & Date

\_\_\_\_\_  
Sign & Date

\_\_\_\_\_  
Sign & Date  
AD Allows to Play UP

Team Sport Registration – Please Check The Box to Register
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**Soccer - Fee is \$80 shirt included**

**Indicate shirt size**

<input type="checkbox"/>
<input type="checkbox"/>

AL – Adult Large	YL – Youth Large
AM – Adult Medium	YM – Youth Medium
AS – Adult Small	YS – Youth Small

Total Due	\$ _____
Amount Paid	\$ _____
Balance Due	\$ _____
Check #	_____