

2025 Youth Cougar Club Soccer Registration

For: TK-6th grade boys & girls

Registration Fee: \$40 for MAC Members or \$50 for non-MACC Members

Register: Complete the form below or register through the MACC website at:
<https://mansonareacommunitycenter.com/activities-at-the-community-center/>

There will be an additional \$3 charge per player when signing up on the website to offset processing fees.

Practices: Mondays and Thursdays from 5:30 pm-6:30 pm with exception of 3rd grade. 3rd grade will practice from 6:30 pm-7:30 pm. Coaches may schedule additional practices at their discretion. Practice is scheduled to start March 24th (weather permitting).

Games: Games will be held on Saturday mornings/afternoons with the first game scheduled for April 6th.

All players will need a soccer ball and shin guards. No front toe cleats.

We will be using the same shirts as last year. If you don't have one or need a replacement you can order it at:
<https://cougarsoccer2025.itemorder.com/shop/home/>

Deadline: Friday, February 28th

If you are interested in coaching or helping coach, please contact Michelle Lamphier @ mlamphier83@gmail.com.

WAIVER OF LIABILITY

I, the parent/guardian of the registrant agree that I, and the registrant, will abide by all applicable rules of soccer and good Sportsmanship. I recognize the possibility of physical injury and hereby release the MAC Center, all coaches, assistants, and any other persons associated with this program and the City of Manson from any and all liability related to participation in the program, including, but not limited to injuries sustained during participation as well as transportation to and from practices and games as part of this program.

CONSENT OF MEDICAL TREATMENT

As the parent/guardian of the registrant, I hereby give consent for emergency medical care prescribed by a primary healthcare provider. This care may be given under whatever conditions are necessary to preserve life, limb, or well being of my dependent.

Print name of parent/guardian: _____

Signature of parent/guardian: _____ Date: _____

Player Information:

Name: _____ Grade: _____

Cell phone #: _____ Email address: _____

Emergency Contact Name & Phone #: _____