

TITAN SOCCER CLUB MEMEBERSHIP APPLICATION

This form must be completed by parents/guardians of students in grade 9-12 that intend to participate in the Centennial High School Soccer Program. If **multiple students** from a family will be in the program, please fill out a **separate** sheet for each student.

Name of Athlete: _____ Grade Entering: _____

Father's/Guardian's Name: _____

Address: _____
(Street Address) (City) (Zip)

Mobile #: _____ Home #: _____

Mother's/Guardian's Name: _____

Address: _____
(Street Address) (City) (Zip)

Mobile #: _____ Home #: _____

Email is used as a primary means of communication with our athletes and parents. It is essential that email addresses be provided for each athlete and each parent that needs to be notified of our soccer program announcements; including booster meetings, practice schedules, and game schedules.

Athlete's Email: _____

Father's/Guardian's Email: _____

Mother's/Guardian's Email: _____

Titan Boys Soccer Membership Levels:

Goal Level: \$125/family
2 Titan Soccer Window Decal
1 Titan Soccer Hooded Sweatshirt; indicate size _____
1 Titan Soccer T-Shirt; indicate size _____

Assist Level: \$90/family
2 Titan Soccer Window Decal
1 Titan Soccer T-Shirt; indicate size _____

Kick-off Level: \$60/family
1 Titan Soccer Window Decal

Additional Cost: Window Decal \$5.00 ea

Committee Participation

(Check all you can help with)

___ Banquet ___ Concessions ___ Fundraising ___ Programs ___ Spirit wear
___ Locker Décor ___ Away Meals ___ Team Dinners ___ Clinic