SOCCER A	ACADEMY APPLIC	
School Year Application applies to:	MUST be complete	g this application, the following checklist ete: the soccer application (including payment form) complet
Date Received by ERMS:		r Middle School Registration form (along with all necessary
SECTION A: (TO BE COMPLETED I	BY PARENT)	
Student's Name:		Grade:
Parent's Email:		Gender:
Home Address:		Postal Code:
Home Phone:	Parent's Cell Phone	<u> </u>
SECTION B: (TO BE COMPLETED I		
School:		YearsAttended:
His/her record of positive behaviour and good  Not meeting expectations  Comments:	citizenship is:  Meeting expectations	Exceeding expectations
Principal Name:	Principal Signature:	
SECTION C: SOCCER HISTORY (st be registered in the upcoming fall soccer		e in the two previous years and mu
be registered in the appearing it seems	3Ca3OII)	
Applicant's Soccer History - Number of Years F	Plaving:	
Applicant's Soccer History - Number of Years F Level of soccer registered for in the fall:		
	ence. Include club,	
Level of soccer registered for in the fall: (Proof must be attached (Soccer League payment receipt) currently playing on a league team or be enrolled for Fall) Please list previous two years of soccer experie level, and coach. (All applicants must have at least 2	ence. Include club, years prior experience)	
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