

ANNANDALE BOYS & GIRLS CLUB REGISTRATION

4216 Annandale Rd. Annandale, VA 22003 703-941-ABGC (2242)

Office hours: Monday thru Friday 3 – 7pm and Saturday 9 – 12 noon

Soccer Coordinator: Helen Crum email: helenkcrum@gmail.com

EMAIL: abgc@abgc.org

REGISTER ONLINE @ WWW.ABGC.ORG & SAVE \$5

Annandale Boys & Girls Club has the longest running Soccer Program in the Washington Area!!

CIRCLE APPROPRIATE SPORT - FALL 2025

Fall Soccer \$150
First Time \$ 75
(Grade Pre-K – 12)

Tackle Football \$175
(Ages 7 to 16)

Boxing
(Ages 7 – Adult)
Call Leo @ 571-436-5983

TOP SOCCER \$112
(Ages 5 – 18)
ATHLETES WITH DISABILITIES

2's & 3's Fall Soccer \$90
(Ages 2 & 3)

Cheerleading \$150
(Ages 5 – 15)

Flag Football \$125
(Ages 5 & 6 by July 1st)

T-Ball \$150
First Time \$75
(Grade K – 2nd)

Elite Cheerleading \$175
Invitation only
(Ages 5 – 15)

There is an additional \$3 charged by the website for each sport/child

Soccer is for Mighty Mites, children ages 4, and for boys and girls in K through 12th grades. Mighty Mites and Kindergarten teams are co-ed. There is an 8 – 10 game season. Every player is guaranteed to play half or more of every game regardless of size or physical ability. Teams are formed on a school and neighborhood concept by grade level. **Tackle Football** is for youth ages 7 – 16. Practices start on Monday, August 4th. After August 17th there will be a \$30 Late fee, after August 24th there will be a \$40 late fee, after August 31st and until the end there will be a \$60 late fee. **Top Soccer**, if you're a member of the JCC it will be \$104, but if you're a non-member it will be \$112. Nobody is ever denied for lack of funds. These materials are *neither sponsored nor endorsed by the Fairfax County School Board, the Superintendent, or this school.*

MAIL OR DELIVER FORM AND FEE TO: ABGC • 4216 Annandale Rd. • Annandale, VA 22003

Requested Coach _____

Special Requests _____

Player's First Name (Print) _____ Last Name _____

Boy ____ Girl ____ Date of Birth _____ School _____

Address _____ City _____ Zip _____

Grade in Sept.25 _____ E-mail _____

Telephone (H) _____ (O) _____ (C) _____

WE RELY ON VOLUNTEERS. EVERYONE MUST PARTICIPATE IN ONE OF THE FOLLOWING: (CIRCLE ONE)

No Fees:

Coach

League Commissioner

\$10.00 Refund (After completion Except A.C.)

Assistant Coach

Deliver Forms to 5 schools

No Refund

Will be a spectator

I hereby give permission for my child to play _____ (Sports). I have insurance to cover all risks of injury or Doctor's bills that might be incurred and accept all responsibility for my child's safety at practice and at games. _____ (Checkmark) **I have read and agree to follow the ABGC Code of Conduct. I also understand that there are no refunds.** In the event I cannot get the team of my choice, I will accept an assignment made by ABGC.

IF YOU ARE NOT A FAIRFAX COUNTY RESIDENT, THERE IS A \$50 FEE

Amt. Paid _____

IF YOU ARE A SCHOLARSHIP PLAYER, THERE IS A \$55 NON-REFUNDABLE FEE

Amt. Paid _____

Parent's Signature _____ Amt. Paid \$ _____ Check ____ Cash ____

Print Parents' First & Last Names _____ Date _____ Credit Card _____