

# ANNANDALE BOYS' & GIRLS' CLUB REGISTRATION

4216 Annandale Rd. Annandale, VA 22003 703-941-ABGC(2242)-FAX 703-941-4412

Office Hours: Monday thru Friday 3 – 7 PM Saturday 9 - 12 Noon

Soccer Coordinator: Helen Crum [helenkerum@gmail.com](mailto:helenkerum@gmail.com)

EMAIL: [abgc@abgc.org](mailto:abgc@abgc.org)

**REGISTER ONLINE AND SAVE \$5 @ [WWW.ABGC.ORG](http://WWW.ABGC.ORG)**

**Annandale Boys & Girls Club has the longest running Soccer and Tee Ball Programs in the Washington Area!**

## CIRCLE APPROPRIATE SPORT – SPRING 2022

### SPRING SOCCER \$140

First Time \$70

Age 3 thru Grade 12

### TEEBALL \$140

First Time \$70

K thru 2<sup>nd</sup> grade

### BOXING

Ages 7 - Adult

Leo @ 571-436-5983

### LACROSSE

Register online at

[www.annandalelacrosse.org](http://www.annandalelacrosse.org)

### SPRING FOOTBALL \$140

Ages 6 - 15

An ABGC player can play both soccer and tee ball at the same time, since the schedules should not conflict. **The half priced registration fee of \$70 is only for "First Time" players in that sport with the Annandale Boys' & Girls' Club .** Spring Football will start March 12<sup>th</sup> and run through Memorial Day. *These materials are neither sponsored nor endorsed by the Fairfax County School Board, the Superintendent, or this school.*

**AFTER REGISTERING, ALL U11 – U19 (SFL) PLAYERS, IF REQUESTED BY ABGC, MUST SUBMIT COPY OF PROOF OF BIRTH.**

Requested Coach \_\_\_\_\_ Special Requests \_\_\_\_\_

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

Player's First Name (Type or Print) \_\_\_\_\_ Middle Initial \_\_\_\_ Last Name \_\_\_\_\_

Boy \_\_\_ Girl \_\_\_ Date of Birth \_\_\_\_\_ School \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Grade in Now \_\_\_\_\_ E-mail \_\_\_\_\_

Telephone (H) \_\_\_\_\_ (O) \_\_\_\_\_ (C) \_\_\_\_\_

**WE RELY ON VOLUNTEERS. PLEASE PARTICIPATE IN ONE OF THE FOLLOWING: (CIRCLE ONE)**

No Fees:	\$10.00 Refund( After completion Except A.C .)	No Refund
Coach	Assistant Coach	Will be a spectator
League Commissioner	Deliver Forms to 5 Schools	
	Office Help (3 Hours)	

Did your child play in the Fall 2020? : Yes \_\_\_\_\_ No \_\_\_\_\_

I hereby give permission for my child to play **SOCCER/ TEEBALL** (circle one). 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. **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 \$30 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 \_\_\_\_\_  
Credit Card \_\_\_\_\_

Parents' First/LastName(Printed) \_\_\_\_\_ Date \_\_\_\_\_