



# PLAYER / PARENT AGREEMENT FORM

## Player Information

Players Name:	
Address:	
City, State, Zip:	
Home Phone:	
Date of Birth:	

## Parent / Guardian Information

Mother / Guardian	
Work Phone:	
Father / Guardian	
Work Phone:	
E-Mail:	

## Financial Agreement

I agree that my child or ward's membership with the Palatine Celtic Soccer Club requires that he/she attend practices, competitions, and tournaments regularly, and that he/she is committed to playing the entire season. I understand that I am responsible for paying his/her season fee in its entirety regardless of the number of practices or competitions in which he/she participates in.

**A non-refundable down payment of \$250.00 (U9 to U14 Age Groups), \$150.00 (High School Ages) or \$100 (Junior Celtic & U8 Age Group) is due at the registration night. All remaining balances will be billed in installments throughout the year and are due by the end of the month billed. I understand that all previous balances must be paid in full before a registration for a new session will be accepted. Any player who requests to be dropped from the Travel Program for any reason, other than a medical injury or illness, will be assessed a \$50 administrative fee in addition to any remaining balance owed through the drop date.**

I understand that these fees do not include the cost of uniforms, travel expenses, or other extraordinary costs. I also understand that if this account is submitted to collections due to non-payment of any fees, then the cost of collection shall be added to the balance of the account. I agree that I will volunteer to work at the Palatine Celtic Cup Labor Day Tournament.

Signature of Parent / Guardian \_\_\_\_\_ Date \_\_\_\_\_