

SoccerStar

Raleigh Academy of Chinese Language



P.O. Box 50375, Raleigh, NC 27650-6375 http://www.racl.org

202___ 秋/春季 足 球 班 学 生 报 名 表 202___ Fall/Spring RACL SoccerStar Registration Form

学生姓名(Chinese)		出生	E日期			
Student Name (English)		BC	D	/	/	性别
	*		Month	Day	Year	Gender
☐ Returning player	Team	Coach				
Following information 父亲姓名(Chinese)	is only required fo					
Father Name (English)					
电话(Phone #)						
电子邮箱(Email addre	ess)	10				
母亲姓名 (Chinese)			20			
Mother Name (English	ı)					
电话(Phone #)					_	
电子邮箱(Email addre	ss)					
家庭地址(Address)_				10		
Emergency Contact and						
Player's Physician & Ir						
Medical Condition						
(P)			- 10 k 1000 1.000			
Please make check pathe player name and team		ademy of Chine	se Langu	age, or F	RACL. On	your check, please write
the player flame and team						
日期 Date	学费 Tuition	&Fees	支票号	码 Chec	ck No.	收费人 Receiver
Mouth Day Year	□ \$75					
MEDIA RELEASE I give permission for any child's participation with						
Parent/Guardian Signature		(Media Release (nly)
WAIVER OF LIABILITY I, the undersigned parer that I accept the inheren Further, recognizing the COVID, I hereby release on behalf of the registral	nt/guardian, understant of risks. I hereby give possibility of physic of discharge and/or of	and that physi e my permissic cal injury asso otherwise inde	on for hin ciated wi emnify R	n/her to th socce ACL Soc	participater and porcerStar	te in RACL SoccerStar tential exposure to against any claim by or
Parent/Guardian Printed Name		Parent /Guardian			— <u> </u>	ignature Date