



# HULMEVILLE SOCCER CLUB

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

E-mail : [hulmevillesoccer@hotmail.com](mailto:hulmevillesoccer@hotmail.com)

Date: \_\_\_\_\_

Amt: \_\_\_\_\_

Form: \_\_\_\_\_

## 2024 Spring Intramural Registration Form

Hulmeville Soccer Club is conducting registration for intramural for the Spring 2024 season. Registration is open to all boys 3-19 and girls ages 3-19.

Register in person, online or via mail:

- Walk-in Registration: Check our website or like us on Facebook for updates. Details will be posted shortly.
- **Online** by going to <https://www.hulmevillesoccer.org>
- By mail by sending form to: **HSC Registrar, 210 Farleigh Court Langhorne PA 19047**

Early Bird Registration Fees:     \$ 75.00 per player if the child played in the Fall 2023 season  
   \$110.00 per player if the child did not play in the Fall 2023 season

**Beginning March 1** Registration Fees: \$105.00 per player if the child played in the Fall 2023 season  
   \$140.00 per player if the child did not play in the Fall 2023 season

Fees are due at the time of registration. Make all checks payable to: **Hulmeville Soccer Club.**

There will be a \$35.00 fee for all returned checks. Any registration postmarked after March 16, 2024 will be processed based upon availability.

**All refund requests must be submitted by March 30, 2024 via email by parent/guardian and player must return all uniform items. Refund will be less a \$20 administrative fee. Email sent to [hulmevillesoccer@hotmail.com](mailto:hulmevillesoccer@hotmail.com) After March 30, 2024, no refunds will be processed.**

Any player that did not play in the Fall 2023 season will be randomly assigned to a team.

<u>Divisions</u>	<u>Age Range</u>	<u>Born on or After</u>	<u>Born on or Before</u>
Instructional Program (Coed)			
U 4	3	1/1/2020	12/31/2021
U 6	4 – 5	1/1/2018	12/31/2019
Boys In-House			
U 8	6 – 7	1/1/2016	12/31/2017
U 10	8 – 9	1/1/2014	12/31/2015
U 14	10 – 13	1/1/2010	12/31/2013
U 19	14 – 18	1/1/2005	12/31/2009
Girls In-House			
U 8	6 – 7	1/1/2016	12/31/2017
U 10	8 – 9	1/1/2014	12/31/2015
U 14	10 – 13	1/1/2010	12/31/2013
U 19	14 – 18	1/1/2005	12/31/2009

All ages are as of birth date on or before January 1, 2023.

**Photocopy of birth certificate for first time registrants is required.**

For additional information e-mail [hulmevillesoccer@hotmail.com](mailto:hulmevillesoccer@hotmail.com) or see our FAQ on our website.

You can register by mail by using the form on the other side of this flyer.

**All registration forms must be postmarked by March 16, 2024 Registrations postmarked after March 16<sup>th</sup> will be assessed a \$30 fee and processed based upon availability.**



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Form: \_\_\_\_\_

## 2024 Spring Intramural Registration Form

**PLEASE PRINT:**

Parent(s)/Guardian(s) Full Name \_\_\_\_\_

[ ] Check if New Contact Information

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Tel. No. \_\_\_\_\_ Cell No. \_\_\_\_\_

E-Mail \_\_\_\_\_

If interested in coaching, please indicate below

Head Coach \_\_\_\_\_ Asst. Coach \_\_\_\_\_

**1<sup>st</sup> Child:** Player's Name: \_\_\_\_\_ Sex: M F

Date of Birth \_\_\_\_\_ Amount \$ \_\_\_\_\_

**2<sup>nd</sup> Child:** Player's Name: \_\_\_\_\_ Sex: M F

Date of Birth \_\_\_\_\_ Amount \$ \_\_\_\_\_

**3<sup>rd</sup> Child:** Player's Name: \_\_\_\_\_ Sex: M F

Date of Birth \_\_\_\_\_ Amount \$ \_\_\_\_\_

If registering after March 16, 2024 add Late Fee \$30 \$ \_\_\_\_\_

Total Amount Due: \$ \_\_\_\_\_

### Photocopy of birth certificate for first time registrants is required.

#### HSC/EPYSA RELEASE STATEMENT

I, the parent/guardian of the registrant, a minor or adult registrant of legal age, agree that the registrant and I will abide by the rules of the Hulmeville Soccer Club (HSC) and the EPYSA, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with Soccer and in consideration for the HSC and EPYSA accepting the registrant for its Soccer programs and activities, I hereby give my permission to have any and all emergency medical attention and/or treatment which may be necessary to be administered to my child while participating in any HSC / EPYSA event. I hereby release, discharge and / or otherwise indemnify the HSC and EPYSA, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of the fields and facilities utilized for the programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the programs, emergency medical attention, treatment and / or being transported to or from the same, which transportation I hereby authorize.

Parent or Guardian

Signature \_\_\_\_\_ Date \_\_\_\_\_

The sole purpose of distributing this flyer is to provide information to the community. The Neshaminy school district and surrounding school districts do not endorse, or sanction the events/activities listed in this flyer. Parents/guardians are urged to thoroughly research any organization providing such information before making a decision to participate.

**Registration Fees: \$ 75.00 per player (\$105 after 3/1) if the child played in the Fall 2023 season  
\$110.00 per player (\$140 after 3/1) if the child did not play in Fall 2023 season**

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