

Thunder Bay Inter Lucania Soccer Club Registration Form

Player Information

Name: _____

Gender (Circle): MALE or FEMALE

Birth Date: Day () Month () Year ()

Address: _____ Postal Code: _____

Home/Cell Phone #: _____ OR _____ Email Address: _____

Team Member Request (Only 1 child will be accommodated): _____

Willing to Volunteer (Circle): YES or NO Position (Circle): Coach / Referee / BBQ

Name: _____ Phone #: _____

Consent Agreement

I do hereby release and hold harmless the City of Thunder Bay, Thunder Bay Inter Lucania Soccer Club and the Lakehead District Catholic School Board, including all employees and volunteers working and/or volunteering on behalf of the city of Thunder Bay, Thunder Bay Inter Lucania Soccer Club, its Board of Directors and sponsors for liability of injury and/or illness that may occur as a result of my participation and/or of any minor to whom I am parent or guardian.

I do hereby give my consent for (Please Print Child's Name) _____ to participate in the mini soccer program offered and operated by the Thunder Bay Inter Lucania Soccer Club either outside of or on the premises of Carrick Recreation Centre and/or the Lakehead District Catholic School Board.

Parent Name (Print Clearly): _____

Signature: _____ Date: _____

Registration Information - Fee: \$50/child

Payment Methods:

- E-Transfer (interlucania@gmail.com)
- Cash
- Cheque (payable to "Thunder Bay Inter Lucania Soccer Club")

How to Register:

- Walk-in Registration (Carrick Centre - 80 Marlborough St)
- Online (www.interlucania.ca)
- By Mail

Mailing Address:

Inter Lucania Soccer Club
318 Piccadilly Ave
Thunder Bay, ON
P7B 5C5

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| <u>OFFICE USE ONLY</u> |
| Payment: Cash OR E-Transfer OR Cheque |
| Division #: _____ (#: _____) |

| Walk-in Registration Dates 2026 | |
|---------------------------------|----------|
| Sat, Apr 11 | 1 - 3 PM |
| Sun, Apr 12 | 1 - 3 PM |
| Wed, Apr 15 | 6 - 8 PM |
| Sat, Apr 18 | 1 - 3 PM |
| Sun, Apr 19 | 1 - 3 PM |

