



**Eatontown Recreation**  
 (Borough Hall)  
 47 Broad Street, Eatontown, NJ 07724  
 (732) 389-7607 or email [rec@eatontownnj.com](mailto:rec@eatontownnj.com)



# 2010 TRAVELING SOCCER PROGRAM

The Eatontown Recreation Department will be accepting registrations for the 2010 Traveling Soccer Program from June 1<sup>st</sup> through July 15<sup>th</sup>. The program is for Eatontown Boys and Girls who will be going into in **GRADES 3<sup>rd</sup> – 8<sup>th</sup>** next school year (2010-2011). Towns included are: Eatontown, Tinton Falls, Little Silver, Shrewsbury, Fair Haven, Monmouth Beach, Oceanport, Rumson and West Long Branch.

**Boys Divisions**

DIVISIONS ARE AS FOLLOWS:

- Division I → Grades 3<sup>rd</sup> & 4<sup>th</sup>
- Division II → Grades 5<sup>th</sup> & 6<sup>th</sup>
- Division III → Grades 7<sup>th</sup> & 8<sup>th</sup>

**Girls Divisions**

**Practices** will begin in Mid- August (depending on availability of coaches). **Games** for all divisions will be played on Saturdays, (September 11 – November 6, 2010).

The **fee** for the program is \$60.00 per child or \$90.00 per family. Checks must be made payable to the "Borough of Eatontown." Refunds will only be given when requested prior to the first game. Free services are available to those without the ability to pay. Call the Recreation Office at (732) 389-7607.

**Registration dates are June 1<sup>st</sup> through July 15<sup>th</sup>, 2010.**

**NOTE:** Any persons who register July 15<sup>th</sup> or later will be placed on a waiting list and subject to a late registration fee of \$20.00 (per family).

♦ For current and future recreation programs, visit [www.eatontownrecreation.com](http://www.eatontownrecreation.com).

While the Borough of Eatontown maintains liability insurance covering the Borough for injuries or expenses occurring by reason of its negligence, the Borough does not carry insurance to provide payment for medical expenses occasioned by injuries unrelated to fault on the part of the Borough or its employees.



## 2010 Traveling Soccer

Adult Last Name \_\_\_\_\_ Adult First Name \_\_\_\_\_

Address \_\_\_\_\_

Primary Telephone #: \_\_\_\_\_ Emergency #: \_\_\_\_\_

Participant Name	Grade As of 9/10	Birthdate	(M/F)	Fee	Division (I, II, or III)
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Participant requires reasonable modifications because of a disability to participate Yes \_\_\_\_\_ No \_\_\_\_\_

**Coaches are always welcome and strongly encouraged. If interested, please check here \_\_\_\_\_.**