



PLAYER/PARENT AGREEMENT FORM

PLAYER/PARENT INFORMATION:

Player(s) Name(s):	
Address City/St/Zip:	
Parent 1 :	
Personal/Work Email:	
Cell/Work/Home Phone:	
Parent 2 :	
Personal/Work Email:	
Cell/Work/Home Phone:	

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 as assigned by the club, and that he/she is committed to playing August 1, 2019 to July 31, 2020. I understand that I am responsible for paying his/her season fees in its entirety regardless of the number of practices or competitions in which he/she participates.

A player who accepts an invitation to play with the club commits to pay the entire fee for the full soccer year (8/1/19-7/31/20). No refunds will be made to players who choose not to participate at any point after accepting your roster spot for any reason other than medical injury/illness (Dr. note required), or relocation.

A non-refundable down payment of \$250.00 is due upon acceptance of your roster spot. All remaining balances will be viewable via Sportsengine in your player account, and are due based on the dates outlined in the "Celtic SC 2019/2020 Travel Fees" document. Player passes will be pulled for accounts that are more than 14 days past due plus incur a \$35 late fee. I understand that all balances must be paid in full by the last payment date for my child..

I understand that these fees do not include the cost of uniforms, travel expenses, the Palatine Park District registration fees for H.S. District resident and Non-resident, other specific team charges, 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 understand that participation within the club that I volunteer at the Palatine Celtic Cup Labor Day Tournament regardless of whether or not my child's team plays in the Celtic Cup tournament.

By signing this document I agree to the terms in the "Celtic SC 2019/2020 Travel Fees" document.

Signature of Parent / Guardian _____ Date _____