



Our Mission: Cato Soccer is dedicated to providing a quality soccer experience for our community by:

- Teaching the skills and fundamentals of the game.
- Encouraging teamwork, respect and sportsmanship.
- Organizing leadership for all levels of play.
- Maintaining a fun, safe, and positive environment.

www.catosoccer.com

BOARD MEMBERS

TERRY FURCO
LARRY KRISTELLER
TRACEY PEREZ
DONNA MINER
DAN PEREZ
LYNN GREENE
MIKE VAN DOREN

Costs
Fall/Winter 2019 - \$20

Mail form and payment to:
Cato Youth Soccer
PO Box 420
Cato, NY 13033

For more information
call/text Terry Furco
315-440-0613

2019 SPONSORS

- Byrne Dairy
<http://www.bvrnedairy.com>
- Cartwright Construction
315-730-6900
- Cato Hardware
315-626-6577
- Cato Shurfine (Terry's)
315-626-2335
- Dudley Water
315-626-6519
- Guidone Physical Therapy
315-626-3179
- Happy Days Drive-In
315-626-2943
- Keysor-Dain-Cullinan
315-626-2201
- Loveless Excavating, Inc.
315-626-6308
- Main Street Wine & Liquor Store
315-626-2007
- Mad Moose Designs
315-370-8543
- Peckham General Contractors
315-626-3199
- Pine Hill Pharmacy
315-626-3161
- Ray's Machine Works
315-626-2364
- RLS Structures, Inc.
315-626-2244
<http://www.rlsstructures.com>
- Sun Harvest Realty
315-626-2277
<http://www.sunharvestrealty.com>
- Van Norstrand Oil
315-626-6640

Child's Name _____
 Date of Birth _____ Male or Female (circle) _____
 Address _____
 Parent Mobile # _____
 Parent/Guardian Name: _____
 Emergency Name/Number (if I can't be reached): _____

I, the parent/guardian of the registrant, a minor, agree that the registrant and I will abide by the rules of CYS and CIMARF, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with soccer, I hereby release, discharge and/or otherwise indemnify CIMARF and CYS, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of 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.

Code of Conduct: All players, Parents, Officers, Executive Board Members, Coordinators, Coaches and Referees are expected to behave in a manner that abides by the Cato Youth Soccer Mission Statement. Inappropriate conduct will not be tolerated. By registering my child, we agree to this code.

Signature: _____

Consent for Medical Treatment: As the parent or legal guardian of the above-named player, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

Insurance Company _____
 Insurance ID# _____
 Any known medical problems or limitations for above player:

Signature: _____

THANK YOU!

Office Use: Date _____ Payment\$ _____ Check# _____