

Pana Soccer Clinic Registration Form

Sponsored by First Baptist Church

Please complete a form for each child you are registering.

Parent/Guardian

First: _____

Last: _____

Contact Info

Email: _____

Phone: _____

Address

Street: _____

City: _____

State: _____

ZIP: _____

Child Participant

First: _____

Last: _____

Grade

3rd

6th

4th

7th

5th

8th

T-shirt Size

Youth Small

Adult Small

Youth Medium

Adult Medium

Youth Large

Adult Large

Please mail this form along with payment to.

First Baptist Church
114 Maple St.
Pana, IL 62557

*Form and payment can also be dropped off at the church
Monday through Friday from 9am to 10pm.*