

# COMSTOCK YOUTH SPORTS

Chyna McMillian, Youth Director  
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## Comstock Youth Boys Soccer

K-5th Grade Boys - Girls season will be in the spring.

**Students that participate must be attending Comstock Public Schools.**

**Overview:** This is a developmental league created to teach and emphasize fundamentals through practice and 3v3 competition. The grade divisions will be K/1st, 2nd/3rd and 4th/5th. Teams will consist of 5-7 kids and competition will be small sided 3v3 games at Comstock Elementary School.

**Coaches:** We need parent volunteers to coach otherwise we won't be able to run the season.

**Practices:** Each week will consist of 1 practice and 1 competition. The particular days will be determined once we have our coaches in place.

**Practice/Competition Gear:** Players should be prepared to bring/wear these items to practice/competition.

- Water Bottle
- Shin Guards (must have a pair to participate)
- Cleats (not necessary but useful)
- Appropriate Practice Clothing

**Week of Aug. 28th:** Teams & Coaches will be determined. Coaches will contact parents by Wednesday, Sept. 6th

**Week of Sept 11th:** Teams will begin practice and will run 5 weeks

**Deadline to Register is Monday, Aug. 28th.**

**Player Registration Form:** Checks made payable to: Comstock Athletics

- Mail to Comstock Elementary School, Attn: Chyna McMillian, 1423 N. 28th St., Kalamazoo, MI 49048
- Drop off cash/check at the Elementary's main office from 8am-12pm, June 19-30, July 10-28 (M-F)

### **Registration Fee**

\_\_\_\_\_ \$30 - Includes uniform shirt

Player Shirt Size (Circle): YS, YM, YL, YXL, AS, AM, AL, AXL

Player Name: \_\_\_\_\_ Player Grade (Circle): K 1st 2nd 3rd 4th 5th

School Player Attends (Circle): Elementary STEM

Parent Name: \_\_\_\_\_ Parent Phone: \_\_\_\_\_

Parent Email: \_\_\_\_\_

**COACH Registration deadline for consideration is Monday, August 21.**

**Registration Fee Waived** if you are chosen to be a coach. Ideally, we will need 1 coach per 5-7 kids.

Coach Name: \_\_\_\_\_ Coach Phone: \_\_\_\_\_

Coach Email: \_\_\_\_\_ Coach Shirt Size: \_\_\_\_\_

Grade Interested in Coaching \_\_\_\_\_ K-1st \_\_\_\_\_ 2nd-3rd \_\_\_\_\_ 4th-5th

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## Comstock Youth Boys Soccer Emergency Contact Information & Risk Warning

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Home Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

2nd Parent/Guardian Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Medical Conditions/concerns our staff should be aware of:

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### Emergency Contacts:

(When attempts to contact parents are not successful and also who may pick up the child if needed.)

Emergency Contact 1 Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact 2 Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact 3 Name: \_\_\_\_\_ Phone: \_\_\_\_\_

As the parent/guardian of the above named child, I give permission for my child to be released from practices and games with the above listed emergency contacts when I am unable to do so or if I am not able to be reached on my above listed phone number.

I hereby authorize the coaching staff and directors to act for me in using the best judgment in any emergency requiring medical attention.

In consideration of my child's participation in Comstock sponsored athletics, I do hereby agree, understand, appreciate, and acknowledge: that participation in such athletics is purely voluntary; that such activities involve physical exertion and contact and that there is inherent risk of personal injury associated with participation in such activities, which risk I assume; and that I agree to, and hereby waive any and all claims, suits, losses, actions, or causes of action against Comstock, its members, officers, representatives, committee members, employees, agents, attorneys, insurers, volunteers, and affiliates based on any injury to me, my child, or any person, whether because of inherent risk, accident, negligence, or otherwise, during or arising in any way from my child's participation in a Comstock sponsored sport.

Parent/Guardian Name (Printed): \_\_\_\_\_

Parent/Guardian Name (Signature): \_\_\_\_\_

Date: \_\_\_\_\_