X1UP RECREATION

SPRING 2023 FIELD HOCKEY PROGRAM REGISTRATION TUESDAYS February 28th – May 30th 3:15pm – 4:30pm

North Creek Sports Field 1, 19016 N Creek Pkwy S, Bothell, WA 98011

(NO Field Hockey March 7th, April 11th)

Minimum Age: 9 years

\$300/season (12 sessions)

Through a variety of field hockey drills and games, participants will practice all the techniques used in the sport, such as: dribbling, passing, and receiving, ball control, shooting, defensive tackling, positioning, etc. This program is open to all skill levels. Field Hockey sticks, balls, and goalie gear will be provided.

Required Personal Equipment: Field Hockey Shin Guards and Mouthguard

Information provided will be used to create an account within 1UP Recreation's secure online registration system. Primary Contact

First Name:	Last Name:	Relationship to Student:
Address:		Email:
Home Phone:	Cell Phone:	Work Phone:
1. Participant Information		
First Name:	Last Name:	Gender Expression:
Nickname:	Current Grade:	Birthdate:
2. Participant Information		
First Name:	Last Name:	Gender Expression:
Nickname:	Current Grade:	Birthdate:

<u>Form of Payment</u>: We want to make it easy for you to make payment, we will accept all options below and will not charge you extra if you select an option with a processing fee.

- □ Check, make check payable to: 1UP Recreation
- Cash
- □ CashApp, \$1UPREC [no processing fee]
- □ PayPal, @1uprec [processing fee of 3% per transaction]
- □ Venmo, @Oneuprec [processing fee of 1.9%+\$0.10 per transaction]
- □ Credit Card, [processing fee of 3% per transaction]

PLEASE DO NOT MAKE PAYMENT UNTIL YOU RECEIVE A CONFIRMATION EMAIL The Season Fee will be prorated for the remainder of the season at the time of registration.



Parent/Guardian Authorization

My child/ward has permission to participate in the Field Hockey program as written above. I will assure that my child is properly prepared for activities including having proper clothing, and required protective gear, being in good health and willing and able to participate. I understand that reasonable measures will be taken to safeguard the health and safety of all participants and that I will be notified as soon as possible in case of emergency.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT AND GIVE PERMISSION FOR MY CHILD TO PARTICIPATE IN 1UP RECREATION ACTIVITIES WITH 1UP RECREATION AS WRITTEN ABOVE.

Print Full Name:

Signature:

Date:

EMAIL COMPLETED FORM TO: Kerries@1uprec.org