



Lady Warriors Soccer Parent Information & Booster Membership Form

This form is used to collect contact information and determine Booster Club participation.

Participation Type (Check One)

- Parent/Guardian of Active Player – Requesting Voting Membership
- Parent/Guardian of Active Player – Information Only (Non-Voting)
- Community Supporter – No Active Player (Non-Voting Volunteer)

Note: Only parents/guardians of active players are eligible for Booster Club membership and voting privileges.

Player Information (If Applicable)

Player Name: _____

Grade: _____

Jersey # (if known): _____

Parent / Guardian Information

Primary Parent/Guardian Name: _____

Secondary Parent/Guardian Name (Optional): _____

Address: _____

Primary Phone: _____

Secondary Phone: _____

Primary Email: _____

Secondary Email: _____

Community Supporter Information (If No Active Player)

Relationship to Program (optional):

- Former Player Parent
- Alumni
- Community Member
- Business Supporter
- Other: _____

Booster Club Communication

The Booster Club uses GroupMe as the primary form of communication for meetings, volunteer needs, and announcements.

- Please add me to the Booster Club GroupMe

Preferred Phone Number for GroupMe: _____

- I will join using the link provided



Also send updates by:

- Text

Preferred Phone Number for Text: _____

General Volunteer Opportunities (Check Any)

I am willing to help with:

- Concessions
- Team Meals
- Fundraising
- Sponsorships
- Senior Night
- Banquets
- Wherever Needed

Leadership/Coordinator Opportunities (Check Any)

I am willing to take on the role of:

- Volunteer and Event Coordinator
- Team Meal Coordinator
- Fundraising Coordinator
- Sponsorship Coordinator
- Senior Night Coordinator
- Banquet Coordinator
- Concession Coordinator

Parent Handbook & Booster Membership Acknowledgment

By signing below, I acknowledge that:

- I have received access to the Lady Warriors Soccer Parent & Booster Handbook
- I have received access to the Booster Club bylaws
- I understand only parents/guardians of active players may be voting members
- I understand that if my player is no longer an active player on the Lady Warriors soccer team, my Voting Membership eligibility will end. I may continue participating as a non-voting member in accordance with the organization's bylaws.
- I understand all Booster Club fundraising benefits the team as a whole
- I understand communication will be primarily through GroupMe
- I understand parent involvement and volunteer support are encouraged
- I agree to support the Lady Warriors Soccer program and Booster Club expectations I understand that policies and procedures may be updated during the season and changes will be communicated.

Parent/Guardian Printed Name: _____

Signature: _____