

JUNIOR HIGH SOCCER CLUB REGISTRATION

Spring/Summer 2026

ONE CHILD PER FORM

www.tiptoniowa.org

(Please fill in the information according to the 2025-2026 school year)

\$25 / per player for all clinic dates

Player's Name: _____

Address: _____

City: _____ School Attending: _____

Zip: _____ Gender: M F Age: _____ Grade: _____

Parents Name(s): _____

Phone: _____ Cell: _____

E-mail: _____

Method of payment:

Cash

Check

Credit Card

****Make checks payable to: Tipton Recreation****

Name on Card: _____ Exp. Date: __ / __

_____ - _____ - _____

CVC: __ - __ - __

For office use only:

Date: _____

Initial: _____

Payment: \$ _____

Ck # _____ Cash

TIPTON SOCCER



JH SOCCER CLUB

MARCH 29: APRIL 12, 19, 26:
MAY 3 & 17- 5:00-6:30 PM

OPEN TO BOYS AND GIRLS
7-8 GRADE- ALL SKILL LEVELS WELCOME

FOR MORE DETAILS CALL JAMES KENNEDY
AQUATIC CENTER - 563-886-2271

WWW.TIPTONIAWA.ORG