

ANNANDALE BOYS' & GIRLS' CLUB REGISTRATION

4216 Annandale Rd. Annandale, VA 22003 703941ABGC (2242)
Office hours: Monday thru Friday 3 – 7pm and Saturday 9 – 12 noon
Soccer Coordinator: Rusty Germain email: Rusty.germain@abgc.org
EMAIL: abgc@abgc.org
REGISTER ONLINE @ WWW.ABGC.ORG

Annandale Boys' & Girls' Club has the longest running Soccer Program in the Washington Area!!

CIRCLE APPROPRIATE SPORT FALL 2026

Fall Soccer \$165 First Time \$ 83 (Grade Pre-K – 12)	Boxing (Ages 7 – Adult) Call Leo @ 571-436-5983	TOP Soccer \$115 (Ages 5 – 18) ATHLETES WITH DISABILITIES
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2's & 3's Fall Soccer \$95 (Ages 2 & 3)	Cheerleading \$155 (Ages 5 – 15)	T-Ball \$165 First Time \$83 (Grade K – 2 nd)	Elite Cheerleading \$180 Invitation only (Ages 5 – 15)
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There is an additional \$5 service fee charged for each sport/child

Soccer is for Mitey Mites, children ages 4, and for boys and girls in K through 12th grades. Mighty Mites and Kindergarten teams are co-ed. There is an 8 – 10 game season. Every player is guaranteed to play half or more of every game regardless of size or physical ability. Teams are formed on a school and neighborhood concept by grade level. Nobody is ever denied for lack of funds. These materials are *neither sponsored nor endorsed by the Fairfax County School Board, the Superintendent, or this school.*

MAIL OR DELIVER FORM AND FEE TO: ABGC · 4216 Annandale Rd. · Annandale, VA 22003

Requested Coach _____

Special Requests _____

Player's First Name (Print) _____ Last Name _____

Boy ___ Girl ___ Date of Birth _____ School _____

Address _____ City _____ Zip _____

Grade in Sept.2026 _____ email _____

Telephone (H) _____ (O) _____ (C) _____

WE RELY ON VOLUNTEERS. EVERYONE MUST PARTICIPATE IN ONE OF THE FOLLOWING: (CIRCLE ONE)

No Fees: Coach League Commissioner	\$10.00 Refund (After completion Except A.C.) Assistant Coach Deliver Forms to 5 schools	No Refund Will be a spectator
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I hereby give permission for my child to play _____ (**Sports**). I have insurance to cover all risks of injury or Doctor's bills that might be incurred and accept all responsibility for my child's safety at practice and at games. _____ (**Checkmark**) **I have read and agree to follow the ABGC Code of Conduct. I also understand that there are no refunds.** In the event I cannot get the team of my choice, I will accept an assignment made by ABGC.

IF YOU ARE NOT A FAIRFAX COUNTY RESIDENT, THERE IS A \$50 FEE Amt. Paid _____

IF YOU ARE A SCHOLARSHIP PLAYER, THERE IS A \$65 NONREFUNDABLE FEE Amt. Paid _____

Parent's Signature _____ Amt. Paid \$ _____ Check ___ Cash ___

Print Parents' First & Last Names _____ Date _____ Credit Card _____