



NILES PARK DISTRICT 2019 Fall SOCCER INFORMATION

These forms are to help make the 2018 Indoor Micro soccer season an easy, organized and pleasant experience for you and your team. Please take the time to fill out this sheet and send it back to the **LoVerde Rec Center by August 16, 2019.**

TEAM NAME: _____

(Be as original as possible and don't pick a common team name)

Which league will the team be playing in. We do allow for kids to play up to an older grade but the team must be registered in the league of the oldest child on the team.

(Circle one)

Pre-K

Kindergarten

1st – 2nd Grade

3rd - 4th Grade

5th - 6th Grade

7th - 8th Grade

Team Parent Contact Information

The team parent is who we will notify about 1st game information, cancellations or any other issue that may arise during the season. It is the team parent's responsibility to pass along any information to the rest of team. Please indicate who the team parent will be.

Name: _____

Address: _____ City/Zip: _____

Home Phone: _____ Cell Phone: _____

E-MAIL: _____



NILES PARK DISTRICT
2019 FALL SOCCER UN-OFFICIAL TEAM ROSTER

*Please fill out the names of the children who **should be** registering for your team. This will help make sure the correct players are placed on your team.

*This form is **UN-OFFICIAL**. Just because a player's name is on this form doesn't mean that they are on the team.

***All players must be registered before the August 8th registration deadline.**

*If a player is not registered before August 8th and you have less than 10 players, the Niles Park District reserves the right to add any player(s) to your team.

Grade: _____

Team Parent: _____

Team Name: _____

School: _____

Player Name

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

11. _____

12. _____

13. _____

14. _____

RETURN TO THE LoVerde Rec Center by August 16th .